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ABSTRACT

Intended to help parents, teachers, administrators and Special Olympics volunteers better understand the rights and educational needs of handicapped children, the manual is organized into nine competency based guides for use in workshops on the physical education and recreation services mandated by P.L. 94-142 (the Education for All Handicapped Children Act). An introductory section introduces the manual and gives guidelines for planning a workshop including a calendar, a master checklist, and an inservice needs assessment. Each of the nine guides contains specific information regarding the law, implications for physical education and recreation, and some concluding self evaluation questions and answers. Chapters have the following titles: "PL 94-142: The Education of All Handicapped Children Act of 1975;" "The Individualized Education Program (IEP);" "Assessments and Evaluation;" "Goals, Behavioral Objectives and Task Analysis;" "PL 94-142: Implications for Physical Educators;" "PL 94-142: Implications for Recreation Leaders;" "PL 94-142: Implications for Administrators;" "The Role of Parents in the Education of Their Handicapped Children;" and "Developing a Comprehensive Individualized Physical Education Program." A resource guide is included which identifies resources (both persons and agencies) by state, who offer information and services; lists references containing legal citations and explanations of P.L. 94-142; provides a glossary of terms; and contans implementation forms (separate spirit masters) appropriate for planning physical education, recreation, or Special Olympics programs. (DB)

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P.L. 94-142: It's the Law

Physical Education and Recreation for the Handicapped

ED198656

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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FOREWORD

Most people recognize that the Education for All Handicapped Children Act (Public Law 94-142), a legislative landmark, requires that every handicapped child is guaranteed the right to a free appropriate public education. However, the Act, for the first time, designates physical education as a mandatory service provided to all handicapped children. I believe that this emphasis on physical education is most significant.

In its report on PL 94-142, the U.S. House of Representatives referred to the role of Special Olympics in providing physical education, recreation and leisure activities for the mentally retarded.

> It has been demonstrated through research and programs such as Special Olympics that physical functioning of the mentally retarded and other handicapped persons can be significantly improved through physical education, exercise and participation in sports. (94th Congress, Report No. 94-332, June 26, 1975, p. 9)

This manual, *PL 94-142: It's the Law*, is expressly designed for parents, teachers, administrators and Special Olympics volunteers to better understand the rights and educational needs of handicapped children. The manual provides materials for use in workshops which bring together parent advocacy groups, school boards, parent teacher associations and other groups interested in providing appropriate services for all handicapped children.

I am grateful to a number of individuals for their support, encouragement and contributions in the preparation of *PL 94-142: It's the Law*:

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Eunice Kennedy Shriver

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Purpose

The purpose of *PL 94-142: It's the Law* is to enable individuals who work with the handicapped (administrators, teachers, Special Olympics volunteers, parents) to upgrade their knowledge, skills and competencies in PL 94-142. *PL 94-142: It's the Law* is designed as a resource guide for facilitators in training the target groups to work individually and collectively to improve physical education and recreation programs for the handicapped. The ultimate goal is to provide and improve the quality of physical education and recreation services for the handicapped.

Format

The manual opens with a statement of significance concerning Public Law 94-142 and its implications upon all handicapped children. The various professionals are acknowledged and recognized for their contribution. The manual contains 9 competency based guides which relate specifically to PL 94-142. The guides provide the trainer with the necessary information to address the workshop audience predetermined by the needs assessment tool (refer to page vii). Realizing that the workshop will be given to many individuals of varying skills and knowledge, this specific tool will allow the trainer to determine what information is most relevant to his workshop audience. Using this design, participants should receive training which suits their individual needs.

The following guides are found in this manual:

Guide 1 PL 94-142: The Education of All Handicapped Children Act of 1975
Guide 2 The Individualized Education Program (IEP)
Guide 3 Assessment and Evaluation
Guide 4 Goals, Behavioral Objectives and Task Analysis
Guide 5 PL 94-142: Implications for Physical Educators
Guide 6 PL 94-142: Implications for Recreation Leaders
Guide 7 PL 94-142: Implications for Administrators
Guide 8 The Role of Parents in the Education of Their Handicapped Children
Guide 9 Developing a Comprehensive Individualized Physical Education Program
Resource Guide

Special Considerations

PL 94-142: It's the Law is a manuscript that is to be utilized for preparing persons involved in physical education and recreation programs for the handicapped. Thus, it is important that users view the current edition as developmental in nature which will serve as an instructional resource to support the future training of educators, recreators, and parents interested in assuring comprehensive physical education and recreation services for the hand capped. It is the authors' intention that facilitators using this manual will provide extensive and constructive suggestions for improving its content. The ultimate beneficiaries of such effort by various users will be the handicapped students who will receive a more appropriate program of physical education and recreation in their school, home and community.

Training Workshop

A training workshop is suggested to provide information and training to four audiences: administrators, parents/volunteers, recreators, and physical educators. It is assumed that these groups will be foremost in providing leadership and knowledge of Public Law 94-142. The workshop will utilize the network of Special Olympics programs as a means for educating the volunteers, coaches, parents, and educators in PL 94-142.

It is proposed that this be accomplished through the development, dissemination (multi-media) and interpretation (in-service training workshops) of materials and instruction which describes an exemplary program of sports training and athletic competition-Special Olympics. In many instances, Special Olympics is the only form of physical education program available to mentally retarded youth while, in other instances, it complements and/or supplements an existing program of physical education for this handicapped population.

PL 94-142: It's the Law has been developed to provide guidelines for conducting training workshops and to serve as a helpful resource for PL 94-142.

Training Workshop Objectives

Upon completion of the training workshop, the participant will:

- Acquire an understanding of the requirements and implications of PL 94-142.
- Understand the basic foundation of conducting a PL 94-142 training workshop.
- Demonstrate an understanding of the most effective way to introduce PL 94-142.
- Understand the procedures for providing information to teachers, parents, community leaders and volunteers in their local areas about PL 94-142.

Guidelines for Conducting a Training Workshop

To help you plan for the training workshop, the following materials are enclosed:

A. Training Workshop Planning Calendar
B. Arrangements You Will Need to Make
C. Master Checklist
D. Securing a PL 94-142 Specialist
E. Budget
F. Description of Day's Events

A. Training Workshop Planning Calendar

Two months prior to hosting workshop the following should be taken care of:

- Select Training Workshop Committee
- Determine site and location for workshop
- Prepare pre-registration cards and other materials
- Contact a PL 94-142 specialist
- Order necessary materials for workshop
- Prepare news release announcing workshop

One month prior to hosting workshop check to see that you:

- Distribute news releases to media and professional publishers
- Distribute pre-registration materials to schools, organizations, and parents
- Distribute workshop materials to PL 94-142 specialist
- Prepare necessary signs for workshop
- Mail out inservice needs assessment module

Two weeks prior to workshop:

- Arrange for refreshments
- Update releases to media, confirming workshop and announce PL 94-142 specialist
- Meet with PL 94-142 specialist and review the workshop plan
- Check number of pre-registration participants

One week prior to workshop:

- Update releases to media
- Check number of pre-registrations received
- Visit site and check equipment necessary for workshop
- Finalize signs and decorations for workshop

Three days prior to workshop:

- Check number of pre-registrations received
- Prepare name tags
- Final news release to media for workshop

One day prior to workshop:

- Finalize stations
- Final check on refreshments
- Final check for all materials
- Final check for all equipment
- Final check with PL 94-142 specialist

B. Arrangements You Will Need to Make

Note: This is just an outline. Feel free to add to the list. Check things off as they are completed.

- *Date, Time and Location*

In arranging for date and time, be sure that your participants will be able to come—a weekend day will probably be best. Sufficient space is important. Possible locations are: public schools, recreation centers, colleges, or university or other conference centers. You will need the facility for approximately 4 hours.

- *Personnel*

In addition to presentor(s), you will need people to help set up stations as well as to clean up after the workshop.

- *Coordinate Workshop Facilities with Maintenance Manager*

For example, determine where the lights are, plug outlets, procedures for unlocking and locking up, and a person to call if help is required.

- *Publicity*

Coordinate with publicity chairperson to inform news media and community groups of events—publicize notable clinicians. Include location, date, time and events. Use TV, newspapers, radio, newsletter, etc. Arrange for news coverage.

- *Arrange for All Refreshments*
- *Arrange for All Training Materials to be Available*
- *Arrange for Dukane Projector, Film Strips, Overhead Projector, Sports Equipment and Manuals*

C. Master Checklist

As the training workshop coordinator, you are responsible for making the workshop as useful, instructive, and exciting as possible. In addition, you are responsible for maintaining high standards of instruction.

There are many details involved in planning and preparing a workshop. The following checklist is provided to assist you:

- Materials needed for modules (See checklist included in module sections)
- Signs to announce and identify the workshop
- Dukane projector
- 16mm projector
- Movie screen
- Overhead projector
- Extension cord
- Refreshments
- Name tags
- Sports equipment
- Pencils
- Manual for each participant
- Secure a facility
- Secure a PL 94-142 specialist

D. Securing a PL 94-142 Specialist

Resource Guide contains a list of people knowledgeable in Public Law 94-142 who can help you conduct your training workshops. The list also includes those who have experience in conducting Special Olympics events as well as knowledge of PL 94-142. If you have any questions regarding PL 94-142 contact persons, please contact Special Olympics Headquarters.

E. Budget

It is estimated that the total cost of the training

workshop should not exceed $50.00. Most facilities can be donated. This $50.00 would include buying training instructional items and/or materials to make them.

F. Description of Day's Events

Following is a recommended time schedule and brief description of the different parts of the training workshop. In order to be the most effective, this schedule should be followed as closely as possible.

Setting Up (allow at least one hour)

The training workshop stations should be set up at least one hour before the workshop is to begin. Be sure all materials are available and your audio-visual presentation is ready.

Greeting (5 minutes)

Welcome participants to the training workshop.

Introduction (10 minutes)

Make brief introductory remarks concerning PL 94-142 and its impact upon the handicapped. Also discuss the format and schedule of day's events.

Guide Pre-test (5 minutes)

Have workshop participants take the specific module pre-test in the manual. They may check their answers. Inservice needs assessment module will determine prior to the workshop what training will take place.

Presentation (45-55 minutes)

Design an outline from materials presented in the guide.

Training Workshop Evaluation (5 minutes)

Before the participants leave, a workshop evaluation form should be completed and returned to the workshop coordinator.

Wrap-Up (5 minutes)

The workshop coordinator should allow time for comments, questions, and suggestions. Of special interest would be the participants' ideas regarding their plans to implement PL 94-142 in their work with Special Olympics.

Inservice Needs Assessment

The purpose of this Needs Assessment tool is to enable the trainer to plan a workshop tailored to your needs. Thus, the questions below were designed to elicit your interests, priorities, and your recommendations regarding the workshop format. We appreciate your time in responding to the questions. In turn, we will guarantee our time in insuring a workshop of maximum benefit to you.

---

1. Which of the following specific topics do you feel should be covered in an inservice training program? Please rank these in order of importance.

_____ Overview of PL 94-142

_____ Assessment and Evaluation

_____ PL 94-142: Implications for Physical Educators

_____ PL 94-142: Implications for Recreators

_____ PL 94-142: Implications for Administrators

_____ The Individualized Education Program

_____ Goals, Behavioral Objectives, and Task Analysis

_____ Benefits of Physical Education and Recreation for the Mentally Retarded

_____ Developing a Comprehensive Individualized Physical Education/Recreation Program

2. What training formats do you feel would be best to meet your own needs? Rank order if more than one is chosen.

_____ training manual
_____ lecture/discussion
_____ independent reading and study
_____ work with small group
_____ slide/film presentation
_____ role playing
_____ demonstration
_____ case studies
_____ hands-on activities
_____ simulation
_____ panel discussions
_____ other—please specify:_____

_____

_____

_____

3. Do you have any specific suggestions as to the inservice program format?

a. # of participants ( ) 10 or less ( ) 11-30 ( ) 30+
b. length ( ) ½ day ( ) 1 day ( ) 2 days

4. Are there any resources or materials which you would recommend for use in an inservice training program? Please list.

_____

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5. What one new and different thing would you suggest should be incorporated in an inservice training program?

_____

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GUIDE 1

PL 94-142: EDUCATION OF ALL HANDICAPPED CHILDREN ACT OF 1975

Overview

Public Law 94-142 was set forth and signed into law to guarantee all children the right to a free appropriate public education. This means that any child who has special learning needs is entitled to special learning services designed to meet those needs. These services must be provided by the public school agency and at the expense of the public school agency. Until this federal legislation was mandated in November of 1975, a free public education was not available to most handicapped children and youth. Under the law, the definition of "handicapped" includes the following disabilities which require special education services (121a.5):

Hearing impairments or deafness

Visual impairments or blindness

Deaf-blind impairments

Speech impairments

Emotional disturbance

Mental retardation

Orthopedic impairments

Learning disabilities

Other health conditions (e.g., diabetes, leukemia, tuberculosis, heart conditions, etc.)

Multihandicapped (two or more of the above disabilities)

A 1973 survey conducted by the Bureau of Education for the Handicapped (BEH) estimated fewer than 20 percent of all schools offered physical education services to handicapped children and of these schools, 80 percent conducted "inadequate" physical education programs. Due to this finding, physical education has been included in the definition of special education.

121.24 Special Education

(a) (1) As used in this part, the term "special education" means specially designed instruction, at no cost to the parent, to meet the unique needs of a handicapped child, including classroom instruction, *instruction in physical education*, home instruction, and instruction in hospitals and institutions.

(b) The terms in this definition are defined as follows:

(1) "At no cost" means that all specially designed instruction is provided without charge, but does not preclude incidental fees which are normally charged to non-handicapped students or their parents as part of the regular education program.

(2) "Physical education" is defined as follows:

(i) The term means the development of:

(A) Physical and motor fitness;

(B) Fundamental motor skills and patterns; and

(C) Skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports).

(ii) The term includes special physical education, adapted physical education, movement education, and motor development.

Maximum and minimum ages of children eligible to receive services are the same as those in each state's public education laws for non-handicapped children. Unless otherwise mandated by state law, PL 94-142 presently requires a free appropriate public education for all children ages 3-18 years, and by September 1, 1980, eligibility for services will extend to all children ages 3-21 years of age. There are, however, two categories where, regardless of state law, children are eligible for special education services (121a.300):

(b) (1) Any disability category required by state law or court order to be served is eligible for special education services.

(2) Any child receiving services from any federally funded program (e.g., Headstart, Title III, Vocational Education, etc.) is eligible for specially designed instruction.

Whereas physical education is a defined part of Special Education, Section 212a.13 assigned *recreation to the role of a related service*:

121a.13 Related Services

(a) As used in this part, the term "related services"

means transportation and such developmental, corrective, and other supportive services as are required to assist a handicapped child to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, *recreation*, early identification and assessment of disabilities in children, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training.

(b) The terms used in this definition are defined as follows:

(9) "Recreation" includes:

(i) Assessment of leisure function;

(ii) Therapeutic recreation services;

(iii) Recreation programs in schools and community agencies; and

(iv) Leisure education.

An important part of the total development and adjustment of all children is the time spent with peers while engaging in activities outside the classroom. Therefore, athletics and extra-curricular activities for the handicapped are addressed as Nonacademic services in Section 121a.306:

121a.306 Nonacademic Services

(a) Each public agency shall take steps to provide nonacademic and extracurricular services and activities in such manner as is necessary to afford handicapped children an equal opportunity for participation in those services and activities.

(b) Nonacademic and extracurricular services and activities may include counseling services, *athletics*, transportation, health services, *recreational activities*, special interest groups or clubs sponsored by the public agency, referrals to agencies which provide assistance to handicapped persons, and employment of students, including both employment by the public agency and assistance in making outside employment available.

[redacted]

The importance of physical education in the total education of a handicapped child is evident in that physical education is the only subject area specifically addressed in the definition of special education. It is important to acknowledge and enforce the intent of the law: *that physical education is mandatory for all children*. It is a defined part of special education, not a related service or an extra-curricular activity. This intent is evident from House Report No. 94-332, p. 9 (1975) which is included in the final regulations (1977):

Special education as set forth in the Committee bill includes instruction in physical education, which is provided as a matter of course to all non-handicapped children in public elementary and secondary schools. The committee is concerned that although these services are available to and required of all children in our school systems, they are often viewed as a luxury for handicapped children.

The Committee expects the Commissioner of Education to take whatever action is necessary to assure that physical education services are available to all handicapped children, and has specifically included physical education within the definition of special education to make clear that the committee expects such services, specially designed where necessary, to be provided as an integral part of the educational program of every handicapped child.

An individual is handicapped when the handicap adversely affects educational performance. Often a child who is handicapped academically can successfully participate with peers in a regular physical education program. Other children can participate with peers in some physical education activities but need specially designed instruction in others. Thus, the final rules and regulations (1977) set forth the following guidelines for physical education:

121a.307 Physical Education

(a) *General*. Physical education services, specially designed if necessary, must be made available to every handicapped child receiving a free appropriate public education.

(b) *Regular physical education*. Every handicapped child must be afforded the opportunity to participate in the regular physical education program available to non-handicapped children unless:

(1) The child is enrolled full time in a separate facility; or

(2) The child needs specially designed physical education, as prescribed in the child's individualized education program.

(c) *Special physical education*. If specially designed physical education is prescribed in a child's individualized education program, the public agency responsible for the education of that child shall provide the services directly, or make arrangements for it to be provided through other public or private programs.

(d) *Education in separate facilities*. The public agency responsible for the education of a handicapped child who is enrolled in a separate facility shall insure that the child receives appropriate physical education services in compliance with paragraphs (a) and (c) of this section.

The rules and regulations presented above illustrate that physical education must be conducted in the "least restrictive environment". Each child should be given the opportunity to participate in the regular physical education program available to non-handicapped children unless the child is enrolled full time in a separate facility or the child needs specially designed physical education. The concept of "least restrictive environment" is not solely one of educational placement (i.e., regular classroom, special class, special day school, etc.) but rather includes the use of specialized instructional procedures irrespective of placement and equipment. Thus, not all specialized instruction requires special placement nor does it always require one-on-one instruction.

Reynolds and Birch (1977) offer a model of educating in the least restrictive environment that is more conducive to current theory. This model assumes that:

> . . . no educational "place is impervious to change and development and that through good efforts many of the varieties of specialized and intensive forms of education can be moved into a developing mainstream. Here it is assumed that students should be removed from the mainstream only for limited periods and compelling reasons, that when in specialized and limited environments their progress should be monitored carefully and regularly and that they should be returned to the mainstream as soon as feasible." (p. 36)

Specialized environments include:

1. Broad psychiatric treatment/educational settings used for periods of especially intensive help to selected students.
2. Special settings for intensive treatment/education dealing with severe motor problems.
3. Settings in which profoundly and severely multiply handicapped children are offered a totally specialized curriculum.
4. Settings that are constructed for maximal efficiency in acoustic management and amplification for the intensive education of hearing impaired students.
5. Special classes for the intensive education of children who are simply floundering in or are unresponsive to regular school environments. (Reynolds and Birch, 1977, p. 37)

Children are moved to specialized environments for specially designed educational purposes only although some may require specially designed physical education. In contrast, limited educational environments are *not* determined educationally. These settings include detention centers, medical facilities and halfway houses. Most children in limited settings require regular education but special physical education.

According to PL 94-142, children should receive an appropriate education in the *least restrictive environment*. The law acknowledges that it is important for a child to have experiences functioning in the real world with handicapped and non-handicapped peers. It is not practical or tenable to educate a child to function in an environment which will not exist in his adult world. Placement in a separate class should only occur if a child's needs are so special that they cannot be met in a regular classroom with support aids and services. As such, this special class placement should be limited only to those activities requiring special education

placement not to activities where students are kept out due to physical barriers. Placement into a separate building or classroom should occur only when *educational* services are so specialized they could not possibly be provided in the regular school building or classroom. Section 504 of the Rehabilitation Act of 1973 forbids placement of students in separate facilities solely because physical barriers (e.g., narrow doors, steps, narrow lavoratory stalls) make the use of classrooms and/or facilities by handicapped students physically impossible.

To make a physical education environment that is least restrictive, the American Alliance for Health, Physical Education, and Recreation Unit on Programs for the Handicapped (1977), recommends the following:

1. careful consideration and appropriate thought be given to adaptations and modifications of methods and devices so that individuals can take part with their classmates.
2. difficulties and problems of individual students might have be anticipated so that progressions and sequence can be broken down further and developed to assist these students in overcoming such problems
3. teachers/leaders recognize that no matter how specifically progressions and sequences are developed they will always have to be refined further and broken down more to meet needs of specific individuals
4. curriculum and program progressions and sequences be looked upon simply as guides and not absolutes if true and meaningful individualization is to result
5. teachers/leaders are also individuals with their interests, abilities, background, and hang-ups which affect the instruction of students.
6. teachers/leaders are individuals working with individuals so that there is no one or magic formula to guarantee success
7. emphasis must be on the learner and learning, not the teacher and teaching.

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Self Evaluation: PL 94-142

Questions:

1. Under PL 94-142, is a child with a handicapping condition who does not need special education services considered handicapped?
2. According to the law, physical education includes the development of physical and motor fitness, fundamental motor skills and patterns and skills in aquatics, dance and group games and sports (including intramural and lifetime sports). These services are _____ for all children.
   (a) optional
   (b) recommended
   (c) required
3. Placement of handicapped children in classes housed in a separate building or classroom should occur
   (a) only when educational services are so specialized they could not possibly be provided in the regular building or classroom.
   (b) when physical barriers prevent a child from reaching his/her full potential in the regular building or classroom.
   (c) when placement in a separate facility allows children to be placed with children with the same handicapping condition.
4. Under PL 94-142, recreation is a "related service" which includes the following components:

Answers:

1. No
2. (c)
3. (a)
4. • assessment of leisure function
   • therapeutic recreation services
   • recreation programs in schools and community agencies
   • leisure education

GUIDE 2

THE INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Every child receiving specially designed education services must have an individualized education program (IEP) designed to meet the special learning needs of the child. The IEP is a written statement of the regular and special education instruction the child is to receive. In order for a child to receive special education services, the following sequence of events must be taken:

1. *Identify the child* according to handicapping condition, and prioritize educational services to the child according to age and adequacy of current education. First priority children are those children in an age group for which the State must provide a free appropriate public education but are not receiving any education. Second priority children are the more severely handicapped children, within each disability, who are *not* receiving an adequate education.
2. *Refer the child* according to state and local procedures.
3. *Assess the child* to determine specific areas of physical education need, and in all areas related to the suspected disability. This will include intellectual performance and academic achievement as well as social/emotional, medical, psychological, and psychomotor assessments.
4. *Interpret assessment data* to determine special physical education program.
5. *Convene the individualized planning conference* in accordance with state and local procedures to develop and subsequently implement the individualized education program.

By law, the following individuals must take part in the individualized planning conferences (121a.344):

1. *A representative of the public agency*, other than the child's teacher, who is qualified to provide, or supervise the provision of, special education (school principals are so qualified).
2. *The child's teacher*. The "teacher" could be the child's special education teacher, a regular teacher, or a teacher qualified to provide education in the type of program in which the child may be placed.
3. *One or both of the child's parents*. The parent could be a foster parent, legal guardian, or "surrogate" parent appointed by the State.
4. *The child* where appropriate.
5. *Other individuals* at the discretion of the parent or agency.

Prior to the Individualized Education Planning Conference, the school must notify the parents early enough to ensure they will have the opportunity to attend, and must schedule the conference at a mutually agreed on time and place. If neither parent can attend the conference, parents can still participate in the IEP development meeting through individual or conference telephone calls. If parents refuse to attend, the conference may be conducted and the IEP developed in their absence. In this case, however, the IEP must be sent to the parents if it is so requested. The intent of these procedures is to guarantee involvement of the parents who have a unique understanding of their child as no other school official has.

Each state and local education agency has developed IEP forms that must contain (121a.346):

(a) The child's present levels of educational performance

(b) The child's annual goals and short-term objectives—in other words, how much he or she is expected to learn over certain period of time

(c) Specific special education and related services that will be provided to accomplish the goals, and the extent the child will be able to participate with nonhandicapped children in the regular school program

(d) Specific dates of when special services or programs will begin and the length of time each will continue

(e) When the child will be reevaluated and what tests and testing procedures will be used to determine if the goals and objectives of the individualized education program are being achieved.

All of this information is designed to specify exactly what changes in behavior and development to expect, and how each program, service or teacher will help the child reach his or her potential. The IEP should give a clear idea of the progress the child is expected to make under the particular plan.

THE INDIVIDUALIZED EDUCATION PROGRAM (IEP)

The IEP is to serve as a guide for educating the handicapped child. No school system, teacher, or administrator is to be held accountable if the child does not attain the specific objectives as planned, providing the individualized educational program has been implemented as planned. In other words, although the IEP is a legally binding document outlining the steps to be taken to educate a particular child, no guarantees can be made as to the total effectiveness of the steps taken.

Each child's IEP must be reviewed and revised at least yearly by the IEP committee and complete reevaluation is required at least every three years.

It will be recalled that physical education includes development of:

(1) physical and motor fitness,

(2) fundamental motor skills and patterns, and

(3) skills in aquatics, dance, individual and group games and sports including lifetime sports.

Recreation includes:

(1) assessment of leisure functions,

(2) therapeutic recreation,

(3) recreation programs in schools and communities, and

(4) leisure education.

These physical education and recreation components must be considered in meetings of every individualized planning committee. However, only those components in which assessment indicates a specific deficiency and need for specially designed physical education or recreation services are to be included in individualized education programs. When educational performance is no longer affected, no individualized programming is necessary. However, when additional support, resources, and equipment are necessary to enable a child to participate in a regular physical education or recreation program they must be specified in that child's IEP. Even though physical and motor needs must be considered during each handicapped child's individualized planning meeting, the law does not require the presence of a physical educator or recreator at the planning conference. When the physical educator or recreator is not included as a member of the IEP committee, relevant information about the child's physical, motor, and leisure needs should be available to and impressed upon all committee members.

As in so many parts of the rules and regulations for PL 94-142, IEP guidelines and criteria have been presented in general terms. Therefore, they must be interpreted and applied to specific curricula or service areas including physical education and recreation. Factors that must be considered when applying the elements of individualized education programs to physical education include: (AAHPER, 1977)

PL 94-142 Provision	Application to Physical Education and Recreation
Statement of the child's present levels of educational performance.	Statement of the child's present levels of development in (1) physical and motor fitness, (2) fundamental motor skills and patterns, and (3) skills in aquatics, dance, individual and group games and sports, including lifetime sports. This statement must be based on information obtained through assessment processes designed to provide input about the child's levels of physical and motor development.
Statement of annual goals including short term instructional objectives.	Statement of annual goals in areas of physical and motor development, determined analysis and interpretation of assessment results in these areas for each child. Annual goals provide direction for the child's program throughout the year and ultimately for daily instruction. Statement of short term instructional objectives in terms of specific movement patterns, fitness components, and aquatics, dance, games, and sport skills needed to reach the long-term more general annual goals. Short term instructional objectives provide the focus of day-to-day instruction.
Statement of specific special education and related services to be provided to the child and the extent to which the child will be able to participate in regular educational programs.	Statement of specially designed physical education required by the child to attain specific short term instructional objectives based on needs identified through the assessment process—i.e., individual

PL 94-142 Provision	Application to Physical Education and Recreation
	tutoring or one-to-one relationship in special adapted aquatics program; adapted aquatics program; small homogeneous group based on swimming ability or handicapping condition for special adapted aquatics program; regular beginning swimming program with supplementary one-to-one/small group assistance; regular beginning swimming program with additional adapted aquatics sessions weekly. Statement of related services necessary to enable the child to benefit from specially designed physical education services—i.e., transportation to and from the pool; aide to assist in dressing/undressing, getting to/from locker room/pool. Statement indicating those periods and/or activities the child can take part in regular physical education program—i.e., stay in adapted aquatics program until child enters pool independently; divide time equally between regular and adapted aquatics programs; full time beginning swimming program with supplementary one-to-one small group assistance; eighty percent, fifteen minutes of each period in beginning swimming program.
Projected dates for initiation of services and the anticipated duration of the services.	Statement specifying when specially designed physical education services are to begin and how long they are to be provided. These dates are to be projected for both annual goals and short term instructional objectives. Readers are reminded that final rules and regulations did not require any agency, teacher, or other person be held accountable if a child does not achieve growth projected in annual goals and objectives. Individualized education programs are not contracts; they are simply guides to progress and growth.
Appropriate objective criteria and evaluation procedures and schedules for determining on at least an annual basis whether short term instructional objectives are being achieved.	Basic approaches that can be considered to insure that objective criteria and evaluation procedures are used including: . . . Standardized instruments with normative data to assess individual progress and make comparisons with other children of comparable chronological age, handicapping condition, and related characteristics. . . . Criterion referenced approaches in which progress is readily assessed and defined as students move from one level in a progression to the next. . . . Informal techniques including observations, anecdotal records, case studies, rating scales, self-evaluation, and similar items should not be overlooked in this process especially when tempered with experience, knowledge of activities, understanding of children in general and the individual child in particular, and good judgment.

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Self Evaluation: The Individualized Education Program

Questions:

1. An Individualized Education Program (IEP) must be designed for

   (a) any child attending public schools.

   (b) every child receiving specially designed educational services.

   (c) home-bound students.

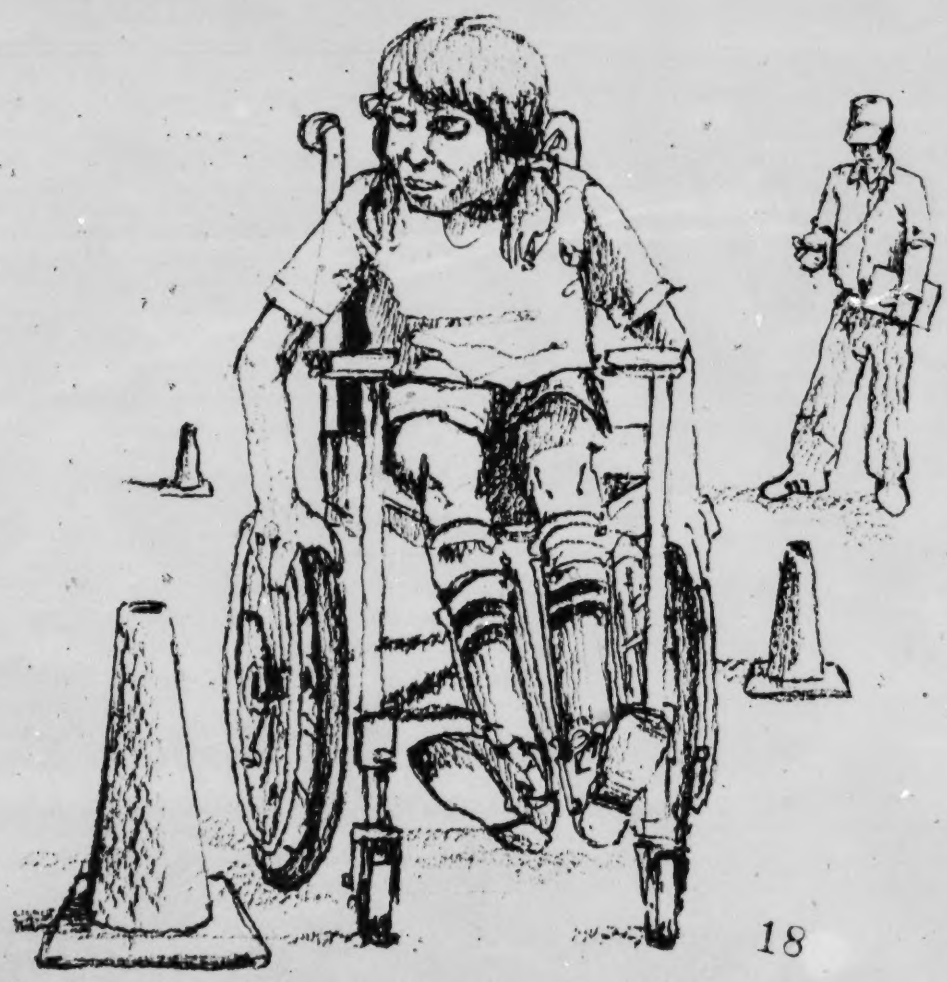
2. Name at least 3 parties who must take part in the individualized planning conference.

3. Each child's IEP must be reviewed and revised ____ time(s) per year by the IEP committee and complete re-evaluation is required at least _____.

4. Explain when (a) physical education and (b) recreation are to be included in a handicapped child's IEP.

Answers:

1. (b)
2. • school principal or other representative of the public agency
   • the child's teacher
   • one or both of the child's parents
   • the child
   • other individuals chosen by the parent or agency
3. at least one every three years
4. • Physical education should be considered in the assessment of each child but need only be included in an IEP if special physical education services are required. Recreation is seen as a related service and needs to be included in an IEP only if they are required to assist the child to better benefit from special education.



ASSESSMENT AND EVALUATION

There are three phases of testing when designing individual programs for the handicapped. These phases are:

(1) *screening* for identification,

(2) *educational diagnosis* for placement and programming, and

(3) *evaluation* for monitoring progress and revising the educational plan.

First, screening serves to locate any students in need of specially designed instruction. Screening methods may be subjective (i.e., physician, parent, or teacher referral) or objective (performance on standardized tests). Each state or local education agency must have and implement an approved written procedure for identifying handicapped students.

Second, those students identified through screening procedures proceed to educational diagnosis to determine placement and methods of instruction. The Education of All Handicapped Children Act specifies the individualized education program (IEP) must include:

(1) a statement of the child's present levels of educational performance (educational diagnosis) and

(2) appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether short term instructional objectives are being achieved (evaluation).

Before any action is imposed to place a handicapped child in a specially designed program, a full and individual assessment of the child's needs (educational diagnosis) must be conducted. According to Section 121a.532, tests and other evaluation materials must include those tailored to assess, or measure, specific areas of educational need and not merely those which are designed to provide a single general intelligence quotient. In other words, tests must be conducted to assess each child's level of functioning in educational, psychological, sociological, and adaptive behavior areas. Since physical education is a defined part of special education and recreation a related service, assessment in the psychomotor domain should be included in the battery of tests, and should always be considered in the IEP development meeting. However, if it is determined during the IEP meeting that specially designed physical education or recreation is not warranted, it should not be included in the IEP.

Third, evaluation procedures are necessary for assessing whether the goals and instructional objectives as specified in the IEP have been met. This requires the use of content-referenced measurement. *Criterion referenced tests* monitor an individual as he/she progresses from one level to the next level of a sequence. For example, the Sports Skills Instructional Program breaks down each instructional objective into sequential subskills (See Figure 1). Initially each student's performance on that objective is rated according to the subskills making up that objective. Continuous evaluation occurs during instruction by appropriately marking a subskill when it has been achieved. The difference between an individual's skill prior to instruction and at the end of instruction indicates the change in performance that has occurred because of instruction.

The evaluation technique selected should be relevant to the assessment instrument used *and* the instructional objective designed in the IEP. For instance: to measure a child's level of physical fitness, a test designed to measure physical fitness, not one designed to measure fine motor coordination should be used and likewise, your instructional objectives would be designed to increase the child's level of fitness, not to improve their ability to shoot an arrow.

Important Considerations of Tests and Testing Procedures in Physical Education and Recreation

As defined in PL 94-142 physical education includes:

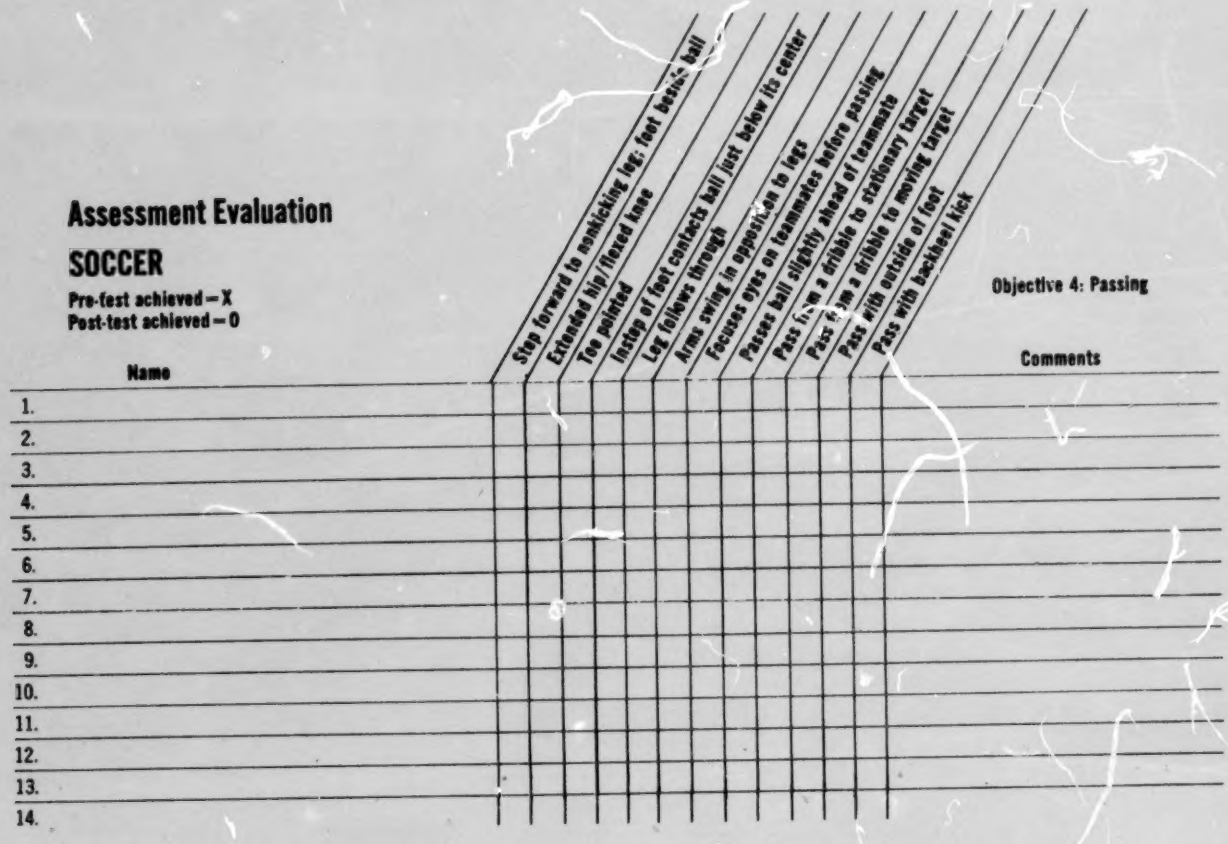
(1) physical and motor fitness,

(2) fundamental motor skills and patterns, and

(3) skills in aquatics, dance, individual and group games and sports including intramural and lifetime sports.

Therefore, a handicapped child's psychomotor functioning should be assessed and evaluated in these areas. As a result of the assessment, the teacher can prepare specific instructional objectives for the child's individualized education program.

Rules and regulations for PL 94-142 require that



tests and other evaluation materials (121a.532):

(1) are provided and administered in the child's native language or other mode of communication, unless it is clearly not feasible to do so;

(2) have been validated for the specific purpose for which they are used; and

(3) are administered by trained personnel in conformance with the instructions provided by their producers:

(b) Tests and other evaluation materials include those tailored to assess specific areas of educational need and not merely those which are designed to provide a single general intelligence quotient;

(c) Tests are selected and administered so as best to ensure that when a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (except where those skills are the factors which the test purports to measure);

(d) No single procedure is used as the sole criterion for determining an appropriate educational program for a child; and

(e) The evaluation be made by a multidisciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability.

(f) The child is assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and *motor abilities*. (20 U.S.C. 1412 (5) (C).)

These rules reflect the concern which has arisen in recent years regarding the bias of standardized tests. Minority groups tend to have a high proportion of their children classified as handicapped and many studies have shown that these children are often misjudged and misplaced due to socioeconomic biases and testing procedures. Also, most tests assume all sensory and motor abilities are fully intact and functioning. Children with sensory and/or motor impairments will naturally score below their ability if test responses are

dependent on proper functioning of the child's impaired area. For these reasons, it was necessary to require non-discriminatory testing for children to prevent underestimation and masking of a child's true ability despite biases based on disability, culture, or economic status.

Two points of particular interest to the physical educator and recreator are the stipulations that:

(1) tests must be administered by trained personnel, and

(2) the child must be assessed in all areas related to the suspected disability. Therefore, local and state educational plans for implementing PL 94-142 should provide for motor assessment by qualified physical educators only and leisure assessment by qualified recreation or leisure personnel only. Psychologists and special educators have not been trained to diagnose or assess impairments of these domains.

Whereas the IEP must be reviewed and revised by the IEP team at least annually, complete reevaluation of the child must be conducted every three years or more frequently if:

(1) conditions warrant reevaluation, or

(2) the child's parents or teacher requests reevaluation.

Implications of assessment and evaluation provisions for the physical and motor domain are as follows: (AAHPER, 1978)

PL 94-142 Provision	Application to Physical Education and Recreation
Be provided and administered in the child's native tongue or other mode of communication unless it is clearly not feasible to do so.	Give necessary instructions for leisure assessment, physical fitness, motor development, skills, and other tests in child's primary language if other than English. Include other modes of communication as necessary; i.e., sign language for deaf children, Braille or audio-cassette instructions for blind students, pictures for nonverbal students, coaction for deaf-blind individuals, combinations of various methods for multiply involved persons.
Be validated by trained personnel in conformance with instructions provided by the producer of the instrument.	Use leisure education, therapeutic recreation, physical education, adapted physical education, motor-development specialists, or other personnel with appropriate background, training, and experience in these specific areas in processes by which test batteries and individual test items are validated. Use same types of personnel as listed above whether process to determine if test instruments and assessment devices measure what they say consists of research or statistical approaches or is determined through face validity procedures.
Deal with all areas related to the suspected disability including, where appropriate, health, vision, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.	Recognize positive and/or negative effects of particular disabilities on physical and motor function and performance in individual children as well as the positive and/or negative effects of physical and motor activities on the disability itself. Deal with only those characteristics, traits, and functions which affect the particular activities under consideration. Avoid making categorical generalizations based on handicapping conditions.

PL 94-142 Provision	Application to Physical Education and Recreation
Be tailored to assess specific areas of educational need and not merely those designed to provide a single general intelligence quotient.	Use tests designed to assess physical fitness performance for this purpose and not as a means of determining basic motor development or ability in sport skills. Use test items designed to assess function and ability in specific components of physical fitness, gross motor ability, fine motor skill, or sports skills only for that particular purpose—balance test items are not appropriate as indicators of muscular strength or endurance. Make generalizations cautiously; because an individual does well or poorly on a specific test item cannot be interpreted as strength or weakness in more than that particular movement, pattern, or skill. Avoid a single general leisure, physical or motor quotient in the same way and for the same reasons a single general intelligence quotient is prohibited. Do not make generalizations or assumptions about physical and motor performances on the basis of categorical information about handicapping conditions. Base decisions about physical and motor needs on appropriate input about physical and motor function.
Be selected and administered so as to best ensure that when a test is administered to a child with impaired sensory, manual, or speaking skills, test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure rather than reflecting the child's impaired sensory, manual, or speaking skills except where these skills are factors which the test purports to measure.	Remove or adapt specific test items that do not reflect an individual's level of physical and motor fitness, fundamental motor skills or patterns or skill in aquatics, dance, individual and group games and sports and lifetime sports but rather how his/her handicapping condition affects achievement and performance in these areas. For example, eliminate carrying and picking up objects on shuttle run for blind students; substitute wheelchair dashes or wheels for sprint, run-walk, and running event as indicators of power or cardiorespiratory endurance; develop balance activities involving crutch use in place of traditional static and dynamic balance activities.
Not be a single procedure or a single criterion for determining an appropriate educational program for a child.	Use a variety of sources and procedures to determine specific physical and motor needs of each child; such as formal and informal devices, quantitative and qualitative measures, objective and subjective data, and observational and anecdotal input are all necessary to determine each child's needs in terms of actual cause and effect relationships. A single procedure promotes attacking symptoms, not basic causes of a problem. Use of information obtained solely from a single performance sequence or progression does not provide input about the child's social, emotional, and intellectual factors that can affect physical and motor performances. Often these non-physical and motor factors are more important considerations than physical and motor ability in determining performances in these areas.

PL 94-142 Provision	Application to Physical Education and Recreation
Be conducted by a multidisciplinary team or group of persons including at least one teacher or other specialist with knowledge of the area of suspected disability.	Obtain input from other recreation and school personnel and specialists so that the most accurate assessment of why the child has particular physical and motor problems can be determined. Input from regular classroom teachers, special education teacher and resource personnel, physicians, nurses, physical therapists, occupational therapists, recreation and therapeutic recreation specialists can be very helpful in this process. Keep focus and emphasis on the child, not the program activity, therapy, or modality. Strive to have input from or active participation by physical education personnel or motor development specialists in every individualized planning meeting to foster two way communication regarding physical and motor needs of the child. Recognize that a physical educator, adapted physical educator, motor development specialist, therapeutic recreator, or other person with background, training, or experience in the physical motor areas/psychomotor domain must be considered the specialist to provide input about a child's needs in these areas.

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Self Evaluation: Assessment and Evaluation

Questions:

1. What are the three phases of testing when individualizing programs for handicapped students?
2. Is it allowable to place a child in a specialized educational program solely on the basis of the results of a general IQ score?
3. In determining a child's level of performance for placement in a physical education class, why is it important that tests which usually assume that all sensory and motor abilities are fully intact and functioning be adapted for use with each child?

Answers:

1. • screening (subjective or objective)
   • educational diagnosis (for placement)
   • evaluation (to determine progress)
2. No. A battery of tests must be conducted to assess each child's level of functioning in education, psychological, sociological and adaptive behavior areas.
3. If a child has a sensory or motor impairment, he/she will score below his/her ability if the test is based on proper functioning of the area in which he/she is impaired. The test should be adapted to show how the child's handicapping condition affects achievement and performance in the area being tested. For example, children who are in wheelchairs cannot be expected to run the 50 meter dash. Wheelchair dashes should be substituted.

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GOALS, OBJECTIVES AND TASK ANALYSIS

In selecting suitable activities to teach exceptional learners, several important factors must be kept in mind. The individualized educational program for a student must contain clearly written annual goals, short-term objectives and specific evaluation procedures. In determining annual goals for a learner, we must first know the student's current level of performance. Then we must make a judgment concerning what the learner needs to know or be able to do and of these new goals which will receive the greatest emphasis in time and resources.

In selecting goals for a given learner, keep these factors in mind:

1. Learner's age
2. Skill level
3. Educational setting
4. Learner's interests

Goals are specific behavioral tasks that are analyzed into related short-term instructional objectives.

Examples of well written goals:

(1) The student will acquire basic fundamental skills, appropriate social behavior and functional knowledge of rules to enable him to successfully participate in a regulation game of basketball.

(2) The student will acquire the basic skills to enable him to be water safe in a swimming pool.

(3) The student will demonstrate the fundamental skills necessary to successfully ski down a mountain or trail.

What is a Behavioral Objective?

Before you can take a task and break it into its component parts, you must select the precise behavior you want the learner to perform. A behavioral objective is a statement which specifies some observable or measurable behavior which the student is expected to exhibit after a learning experience.

Most behavioral objectives contain four parts:

1. Behavior
2. Conditions
3. Standard
4. Content

Behavior

The behavior is a statement or description of the specific terminal behavior the student must perform.

Examples:

(1) Bounce a basketball

(2) Throw a frisbee disc

(3) Select the proper softball equipment

(4) Prepare the badminton court

Conditions

Conditions refer to any special circumstances needed for the learner to perform the required behavior. It tells such things as what the learner will be provided, what he will be denied or what the setting will be.

Examples:

(1) Given a glove and the command,

(2) Given pictures of several professional teams,

(3) Given a demonstration and verbal command,

(4) Without assistance, the student will skate.

You tailor the conditions to fit both the task to be performed and the unique characteristics of the learner who is asked to perform the behavior.

Standards

The standards tell how much or how well a behavior must be performed. It may be stated as a specific quantity (such as completing 2 out of 3 trials) or as a percentage of correct responses. In some cases, speed may be considered as a standard as in running or swimming.

Examples:

(1) Four out of five times

(2) In 10 seconds

(3) Forty repetitions

(4) With 100% accuracy

(5) 25 meters

You are the one to determine the level of acceptable performance. This level of standard may change from student to student and may also be increased as the student's proficiency increases.

Content

The content is the information that tells what the objective is about. It can be a separate part of the objective or it is sometimes mixed in with the other parts.

Example:

"The student with upper extremity weakness will be able to accurately pass a basketball using a chest pass to a teammate 10 meters away at least 70% of the time."

"student with upper extremity weakness"—Describes STUDENT

"accurately pass a basketball using a chest pass"—Describes CONTENT

"to a teammate 10 meters away at least 70% of the time"—Describes STANDARD

Let's Sum It Up!

A behavioral objective is a clear statement of instructional intent which communicates to the student in precise terms the:

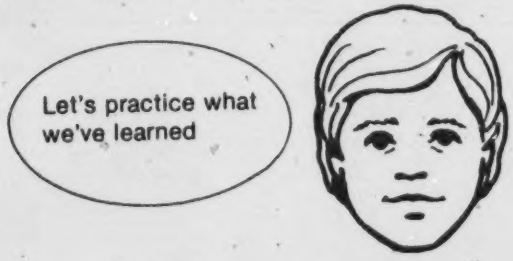
(1) BEHAVIOR to be performed;

(2) CONDITIONS under which the behavior is to occur;

(3) STANDARDS of acceptable performance;

(4) CONTENT which tells what the objective is about.

A useful formula for writing behavioral objectives is found in the following questions. Who? Does what? How well? Under what conditions?



See if you can label the BEHAVIOR, CONDITIONS and STANDARDS of each of the objectives listed below:

(1) **Given a variety of clothing** _____, the student will **select and wear the appropriate clothes** _____ for participation in a game of soccer **100% of the time** _____.

(2) The student will be able to **record his bowling score** _____ **during a game** _____ **accurately** _____.

(3) **Given a verbal command** _____, the student will **run 400 meters** _____ in **65 seconds** _____.

Place a check beside the part of each of the objectives below that is *missing*.

(1) The student will stop a puck from a teammate 5 meters away.

_____ BEHAVIOR missing
_____ CONDITIONS missing
_____ STANDARDS missing

(2) The student will practice hitting a softball.

_____ BEHAVIOR missing
_____ CONDITIONS missing
_____ STANDARDS missing

(3) Given a baseball glove and the command "catch the ball", the learner will catch the ball.

_____ BEHAVIOR missing
_____ CONDITIONS missing
_____ STANDARDS missing

(4) Which of the above 3 objectives is not really a behavioral objective at all? Circle your answer below.

1 2 3

Writing Practice

Try your luck at writing a behavioral objective for the topic "Heading a soccer ball". Read the example and then write one of your own in the space provided.

Who? The student . . . _____

Does what? will be able to head a soccer ball . . . _____

How well? into a goal . . . _____

Under what conditions? three meters away 70% of the time. _____

You try it!

Who? _____

Does what? _____

How well? _____

Under what conditions? _____

How did it look to you? Let someone else read your objective. Is it clear, precise and specific to them? Do they know what they are to do, how well they should

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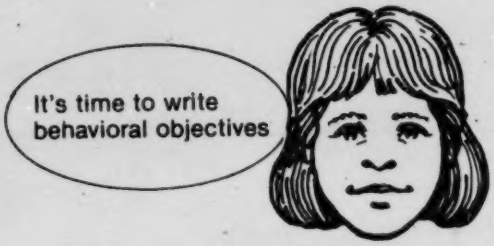
Key: 1. Condition; 2. Behavior, Conditions, Standards; 3. Standard; 4. 2

do it, and under what condition they are to do it? If so, then you have written a good behavioral objective.



Try your luck at writing two or more behavioral objectives for your own instructional program. Remember each objective should state the *BEHAVIOR* the student is to perform, the *CONDITIONS* under which the behavior will be performed, and the *STANDARDS* of performance that are considered acceptable. It should also contain enough *CONTENT* so anyone will know what the objective is about. The order or form is not as important as the clarity of the parts.

(1) _____
_____
_____

(2) _____
_____
_____

(3) _____
_____
_____

How did you do?

Does each objective have a clear statement of the *BEHAVIOR*, the *CONDITIONS, STANDARDS,* and the *CONTENT*? CONGRATULATIONS! YOU JUST FINISHED THE UNITS ON OBJECTIVES.

Task Analysis

All tasks, complex or simple, consist of a series of steps to be learned prior to completion of the task. Thus, we learn how to walk before we can run, and we learn how to turn on the water before we can be expected to wash the dinner dishes. We learn how to grasp before we can throw a softball, and we must be able to perform a vertical jump prior to learning to high jump. Much of our current or previous learning is based upon using existing skills or knowledge as a stepping stone or base upon which to build new skills.

Task analysis is the identification of steps required to complete a specific objective. It includes a list of all the steps included in the job (and, perhaps, the ideal sequence for teaching the job). Task analysis involves breaking down a skill into small, specific steps that can be taught individually to the child. A task broken down in this way contains all of the elements of the completed skill in the order in which the task is usually done.

Task analysis plays an important role in skill instruction for the mentally retarded. It is being recognized now that even simple jobs contain a variety of steps essential to the completion of the task. In order for the handicapped person to learn the job, it is often necessary to specifically instruct the child in each step of the task. Thus, to teach a child to perform a long jump from a standing position (a task that most children learn either by observation or with little directed help), it may be necessary to specifically teach a number of components to the handicapped child. The child may have to be taught how to bend his knees, how to swing his arms, and how to land safely. It may be necessary to actually teach him to propel his body upward into the air. Physical assistance, a miniature trampoline, jumping off objects and music are some strategies the teacher might use in the student's instruction. So, if this is a skill which you wish to teach a handicapped child, some or all of these components may all actually have to be taught to the child. The results of your assessment with the child will determine which components need to be specifically taught.

Task analysis of a skill provides the teacher with a set of behaviors to teach—a blueprint for teaching. By knowing the behaviors which make up a skill, the teacher can measure the performance of the pupil on each of these behaviors. Then, if the pupil fails to perform one or more of the behaviors, the teacher can modify the teaching of the particular behaviors of concern—not randomly change teaching strategies, etc. which may be a waste of both teacher and pupil time. (No sense tearing down the roof when the floor needs to be rebuilt.)

Task analysis often provides the best sequence in which to present the tasks, i.e., the child may have all the sub-skills to complete the task except for the ability to grasp. It also allows for measurement, reinforcement, and verbal or physical prompting for each step. Task analysis allows specific performance criteria for each step in the sequence.

Task analysis can also determine at which point in the program the child may be having difficulty. If the child is attempting the technique of heading in a soccer program but just doesn't seem to be making the progress expected, it will be relatively easy to pick out the specific step or steps where there is difficulty. Thus, a child progressing satisfactorily through most of the steps may be having extreme difficulty in heading the ball in a downward direction. At this point, it is possible to pick that particular step out of the whole sequence and plan how to specifically instruct to that step.

REVIEW:

Before you can take a task and break it into its component parts, you must select the precise behavior you want the learner to perform. A behavioral objective is a statement which specifies some observable or

measurable behavior which the student is expected to exhibit after a learning experience.

Example:

Given the names of the positions of a baseball team, the learner will place the name cards on a diagram of a baseball field with 100% accuracy.

This is the prerequisite step in task analysis. Where do we go from here.

Steps in Task Analysis

(1) **ISOLATE** . . . specific tasks or steps in order to accomplish the objective

(2) **SEQUENCE** . . . the steps in the proper hierarchy for accomplishment of the objective

(3) **DESCRIBE** . . . how you will utilize this sequence of steps with your students

a. **WHERE** will your students enter the sequence?

b. **WHAT** specific teaching strategies will you use?

c. **HOW** well have your students done? Measure their progress!

[redacted] . . . *specific tasks or steps in order to accomplish the objectives.*

Now that you have identified the short-term objective that you want the child to learn, you must figure out all the steps leading to the final behavior.

For instance, when observing a student bouncing a ball, these are the specific steps the student exhibits:

(1) Looks directly at ball.
(2) Grasps ball with 1 or 2 hands.
(3) Contacts ball at hip height.
(4) Pushes ball downward with fingers.
(5) Flexes wrist.
(6) Extends elbow to impart force on the ball.
(7) Bounces ball in front of foot.
(8) Bounces smoothly for five consecutive bounces.

While the order in which you do the steps above may vary, you can see that you isolated and described only those actions required to bounce the ball. We did not concern ourselves at this point with whether or not the student had necessary eye-hand coordination, the type of ball used, or the surface he was bouncing the ball on. Our focus was strictly on the tasks at hand. It is of prime importance that you keep this focus in mind. *Look only at those skills needed in that particular task.*

[redacted] . . . *the steps in the proper hierarchy for accomplishment of the objective.*

All of the steps identified for bouncing the ball were in order or sequenced from the most basic to the more difficult. They were in a hierarchy. In order for your students to accomplish a given objective, all of the tasks must be in a sequential order (i.e., simple complex; concrete abstract).

REVIEW ACTIVITY

(1) Watch someone else do the task, or better yet, do it yourself.

(2) Write down all the steps involved in accomplishing the task. (I'll give you a hint—a change of steps usually involves a different action or a different verb.)

(3) Put all the steps in order.

(4) Read through the steps again, doing each step that is written down. Did you leave anything out?

(5) To double-double check yourself, read the steps aloud to a friend and have your friend do only those things which you read. Did you find anything you had missed before?

[redacted] . . . *how you will utilize this sequence of steps with your students.*

In order for task analysis to be most effective, you must not only isolate and sequence those steps to be taught, but you must determine the student's entry level to this sequence, his measured progress within the sequence and the teaching strategies you will utilize.

a. **WHERE** *will your students enter the sequence?*

To begin, assess each child's ability to participate in the tasks. Begin at that point which the child appears ready for. If the children you are working with are younger or have less functional ability, you may have to begin with the first items of the sequence. The more skilled child can start further along in the sequence. The proper place to start instruction can be determined by testing until the student fails. Begin teaching at the point in the sequence.

b. **WHAT** *specific teaching strategies will you use?*

The steps that will be taught to the child are not to be confused with the sequence in which they will be taught. A step in a sequence tells what will be taught—not the order in which it will be taught.

We have specified the objectives and the sequence of steps involved. We must now decide in what order we are going to teach these steps to the child. Four possibilities are immediately apparent.

(1) FORWARD CHAINING—We can begin at the beginning of the first step in the sequence and work forward. This is also the sequence in which the child will be performing the task, and he will benefit from doing the steps in the order in which they will be done in "real-life".

(2) REVERSE CHAINING—We can begin at the final step in the sequence and work backward.

(3) JUMP-IN-AT-THE-MIDDLE CHAINING—We can begin in the middle and work toward both ends. This is occasionally done when the needs of the

teacher or behavior of the pupil require a change in the regular format. Another rationale for this type of chaining stems from the fact that some tasks have their most reinforcing properties in the middle, i.e., croquet. Setting up and putting away the wickets, mallets and balls are not as much "fun" as the actual playing of the game. Therefore, teach the playing skills first!

(4) EASY-TO-HARD SEQUENCE—We can begin with the easiest task in the sequence and gradually work up through the harder tasks. Determining the easiest task in the sequence requires more than cursory ideas about the child. In effect, it means having a thorough knowledge of the child and what is going to be the easiest for him to master.

c. **HOW** *well have your students done?*

The final step in task analysis involves recording pupil performance on each specific task. An accurate record of the child's performance will indicate when the criterion for each step is reached (and thus the child can move on to another step). It will also tell you when the child is not progressing satisfactorily and some kind of an intervention must be made in order to facilitate the child's progress in that area.

Remember that you are shaping complex skills, so take your time and be sure that the child has mastered each task to an acceptable level as indicated by the criteria for each task.

Let's Sum It Up!

Task analysis is the identification of steps required to complete a specific objective. The three steps of task analysis are:

(1) **ISOLATE**
(2) **SEQUENCE**
(3) **DESCRIBE**

Let's Practice What We've Learned

Let's take a skill and analyze it. We'll specify the terminal goal and you do the rest! (Don't feel compelled to fill in all the blanks if they aren't necessary.)

TERMINAL OBJECTIVE: Given verbal directions, the student will demonstrate the ability to throw a ball.

STEPS INVOLVED:
(1) _____
(2) _____
(3) _____
(4) _____
(5) _____
(6) _____
(7) _____
(8) _____
(9) _____
(10) _____
(11) _____
(12) _____
(13) _____
(14) _____
(15) _____
(16) _____
(17) _____
(18) _____

One more consideration should be mentioned at this time. Following the procedures listed in this guide will provide you with a task analysis for a specific skill you want the student to learn. This does not guarantee that your sequence will be the ideal sequence for that student.

Look at the task analysis for throwing a softball as it is currently being used at a recreational center for moderately/severely handicapped intermediate age children. This sequence was developed according to the needs and abilities of the student at the recreation center and has proven to be satisfactory.

TERMINAL OBJECTIVE: Given verbal directions, the student will demonstrate the ability to throw a ball.

STEPS INVOLVED: (Developed for a right-handed thrower)
(1) Identifies the ball
(2) Grasps the ball in throwing hand
(3) Wraps all four fingers and thumb around ball
(4) Stands parallel looking directly at home base
(5) Looks at target
(6) Reaches out with right arm towards target
(7) Draws right hand back
(8) Steps back with right foot
(9) Releases ball as right foot steadies back step and right hand passes thigh in the forward motion
(10) _____
(11) _____
(12) _____
(13) _____
(14) _____
(15) _____
(16) _____
(17) _____
(18) _____

TERMINAL OBJECTIVE: The student will demonstrate the ability to kick a stationary ball.

STEPS INVOLVED:
(1) _____
(2) _____
(3) _____
(4) _____
(5) _____
(6) _____
(7) _____
(8) _____
(9) _____
(10) _____
(11) _____
(12) _____
(13) _____
(14) _____
(15) _____
(16) _____
(17) _____
(18) _____

Check yourself!

TERMINAL OBJECTIVE: The student will demonstrate the ability to kick a stationary ball.

STEPS INVOLVED:
(1) Identifies the ball
(2) Stands still, three to four feet from the stationary ball, arms at sides, and feet shoulder width apart
(3) Looks at ball
(4) Strides forward with non-kicking leg
(5) Plants non-kicking leg
(6) Swings kicking leg in a slight arc towards the ball
(7) Makes contact with ball, keeping head stationary
(8) _____
(9) _____
(10) _____
(11) _____
(12) _____
(13) _____
(14) _____
(15) _____
(16) _____
(17) _____
(18) _____

Now you know how to do it! These examples are in no way to be considered the ONLY way these skills are to be sequenced—you may come up with even better ones. But if they can serve as guidelines for your efforts, they will have served their purpose.

Good luck!

PL 94-142: IMPLICATIONS FOR PHYSICAL EDUCATORS

Implications of PL-94-142	Challenge to Physical Educators
Prior to the enactment of this law, many handicapped children were not educated in the public schools,and hence, were not provided with physical education. Because of the child find procedures associated with this law, many more handicapped children are being served than before, especially severely and profoundly handicapped children. Therefore, more *specialists* in adapted physical education are needed to serve the increasing number of handicapped children.	Teacher training programs are needed in our colleges and universities to train more adapted physical education *specialists*.
The inclusion of children as young as three years of age creates still another population in the public schools—the preschool handicapped. Most physical educators are unaccustomed to working with very young children and with handicapped children. Physical educators must now prepare to plan effective and appropriate physical education instruction for these young children.	Inservice training programs are needed for *regular physical education teachers* and adapted physical education *specialists* who are presently teaching to prepare them to teach younger children. Those responsible for teacher training programs in colleges and universities must be concerned with the education of young handicapped children. Since the motor development of young handicapped children is not well understood, more support of research programs in this area is needed.
The inclusion of older children (those aged 18 to 21) does not create any particular problems for physical educators, since physical educators are accustomed to working with children in higher skill ranges.	One potential challenge to physical educators is to learn to plan activities which are appropriate to both the social maturity and the motor skill levels of older handicapped children, especially among mentally retarded populations.
All handicapped children must be provided with physical education instruction; including those children with hearing impairments or deafness, visual impairments or blindness, speech impairments, emotional disturbance, mental retardation, physical impairments, learning disabilities, chronic health problems, and other health conditions. Physical educators must be prepared to plan effective and appropriate physical education instruction for children with any of these conditions.	Physical educators have traditionally been concerned with the performances of superior athletes. This is reflected in the availability of research findings. Little research has been undertaken to determine the motor learning capabilities or performance characteristics of young children or handicapped individuals. Research on the motor learning and performance characteristics of handicapped children must be supported so that basic information on the motor abilities of these children will be available to teachers.
Since PL 94-142 provides for related services in the education of handicapped children, physical educators must develop a better awareness of the related services most useful to them, namely, occupational therapy, physical therapy, and therapeutic recreation. Physical educators must know when other professional services would be in the best interests of a child, and must be able to communicate effectively with other professionals.	The roles of the physical educator, occupational therapist, physical therapist, and recreation therapist in the schools must be delineated. The services provided by these personnel often overlap, especially among the severely and profoundly handicapped population. There is a need in physical education for assessment devices which will enable physical educators to make educated decisions regarding the necessity for related services.

PL 94-142: IMPLICATIONS FOR PHYSICAL EDUCATORS

PL 94-142 is a threatening law to teachers since it requires and implies numerous changes in teaching practices. This law is perhaps most threatening to physical educators since physical education is expressly defined in the law as a service which must be rendered to all handicapped children, and because many physical educators are ill-prepared for their roles in the education of handicapped children.

Teachers of regular physical education classes are ill-prepared to implement the law because they have not been trained to teach special populations, and because few have had direct experience in working with handicapped children due to the past practice of placing these children in self-contained special classes. Specialists in physical education for the handicapped may also be unprepared for the challenges implied by PL 94-142. Previously, specialists were typically trained in rehabilitation of injuries or in corrective therapy. Only recently have they become involved in the educational process with youthful populations. Both regular and special physical education teachers will need to learn new teaching skills and adopt new teaching practices to fully implement the provisions of the law for the benefit of handicapped children.

For the purpose of this discussion, two types of teachers will be considered: *regular physical education teachers* who are likely to serve those mildly handicapped children who are capable of success in the regular physical education classroom with nonhandicapped peers; and *specialists in adapted physical education* who serve handicapped children in settings outside the regular class. These specialists may also act as consulting agents to regular physical education teachers or as motor development diagnosticians within the public school systems. The implications of PL 94-142 for these classes of teachers will be discussed with reference to four major provisions of this law: (a) free, appropriate, public education; (b) least restrictive environment; (c) due process; and (d) individualized educational planning.

Free, Appropriate, Public Education for All Handicapped Children

PL 94-142 insured that all handicapped children aged 3 to 18 would receive free, appropriate, public education by September 1, 1978, and that all handicapped children ages 3 to 21 will be served by September 1, 1980. The key word in this provision is *appropriate*. By law, appropriate education means specially designed instruction to meet the unique needs of a handicapped child, including:

(1) classroom instruction,
(2) *instruction in physical education*,
(3) home instruction, and
(4) instruction in hospitals and institutions.

The services just named are designated by law as mandatory services which must be made available at no charge to handicapped children or their parents.

As a mandatory service, physical education must be provided to all handicapped children. By law, physical education is defined specifically as the development of:

(1) physical and motor fitness,
(2) fundamental motor skills and patterns, and
(3) skills in aquatics, dance, and individual and group games and sports.

Most handicapped children can profit from instruction in physical education without the use of special support services; however, some handicapped children require the services of occupational, physical, or recreational therapists to be able to benefit from physical education instruction. Support services such as occupational, physical, or recreational therapy should be provided for handicapped children when necessary.

Clearly, it is incumbent upon the physical educator to develop the skills necessary to work with all handicapped children and to learn how the services of other professionals can be used for the benefit of these children. The implications of this provision of PL 94-142 upon teaching practices in physical education are described in greater detail below:

Implications of PL 94-142

PL 94-142 requires that appropriate special services be provided by qualified professionals. Physical educators should make certain that members of their ranks are providing the instruction in physical education which is required by this law.

Challenge to Physical Educators

Presently there are relatively few trained *specialists* in adapted physical education, therefore, in some schools physical education is being taught by teachers who are not trained in physical education methods. Our colleges and universities must train more *specialists* so that all handicapped children may receive appropriate physical education instruction from qualified professionals.

Least Restrictive Environment

The least restrictive environment provision of PL 94-142 requires that handicapped children be educated in the most normal environment in which they can potentially succeed as students. The first significant way in which this provision affects educational practice is to require school systems to provide a variety of possible classroom situations in which to place handicapped children. This variety of classroom situations may be placed on a continuum from least restrictive to most restrictive environments.

- *Least restrictive environments* are those in which the handicapped child is placed in the most normal setting in which the child can succeed. If possible, the handicapped child should be placed with his or her nonhandicapped peers. The least restrictive environment for many mildly handicapped children is the regular classroom in their neighborhood school.
- *Most restrictive environments* are those in which the handicapped child is *unnecessarily* placed in a setting which is distinctly different and physically separate from the setting in which nonhandicapped children are educated. Although an institution may be the most appropriate (and least restrictive) environment for a relatively small number of severely handicapped persons, an institution or state hospital is the most restrictive environment for most handicapped children.
- The variety of educational settings which complete the continuum of least restrictive to most restrictive placements include special classes, resource rooms, consulting teachers, tutors, homebound instruction, and other similar arrangements.

By law, a handicapped child must be educated in the least restrictive environment possible for that particular child.

The least restrictive environment provision of this law also affects the philosophy which underlies the placement of handicapped children into education settings. In the past, the typical procedure was to

(a) label a child (i.e., mentally retarded)

(b) place the child into a classroom setting based upon his or her label (i.e., a class for the mentally retarded), and finally to

(c) program educational activities for the class as a group (i.e., assuming that all mentally retarded children learn in a similar manner and progress at the same rate).[1]

Teacher observations and research evidence indicate that these past procedures are inadequate, since handicapped children tend to be a heterogeneous rather than a homogeneous group with respect to their abilities and rates of learning. History has also indicated that labeling children may negatively affect the academic performances and self-concept formation of some children.

PL 94-142 requires changes in educational practices which avoid the negative consequences of labeling and inappropriate class placement of handicapped children. According the the guidelines associated with this law, the new procedures for determining educational placements involve:

(a) determining a child's educational needs irrespective of his or her handicapping condition,

(b) preparing an individualized educational program (IEP) for each handicapped child which is designed to meet the child's unique educational needs, and then

(c) placing the child into the *least restrictive environment* in which those needs can be met.[2]

Placing children in least restrictive environments does *not* mean mainstreaming or the placing of all handicapped children into regular classes. The law requires that these children be placed in the most normal environment in which they can potentially succeed. The least restrictive environment will be different for each child. Additionally, handicapped children can and should be placed into different environments for different subject matter and activities if these various learning environments are the best way to meet the child's educational needs.

The specific implications of the least restrictive environment provision for physical education are:

[1]AAHPER, *Practical Pointers*, Vol. 1, Number 6, October 1977. Physical Education and Recreation for the Handicapped: Information and Research Utilization Center—Washington, D.C.

[2]Ibid.

Implications of PL 94-142	Challenge to Physical Educators
In 1973 Congress passed the *Vocational Rehabilitation Act*. This act was essentially an affirmative action law for the handicapped which forbade the discrimination against the handicapped in employment and education. Section 504 of this law required that all reasonable accommodations be made to permit handicapped persons accessibility to public events, programs, buildings, transportation systems, etc. According to this law, school systems should already have made reasonable accommodations in their school buildings and educational programs.	The *Vocational Rehabilitation Act* forbade discrimination in education, requiring that schools could not deny their educational programs to handicapped persons who were otherwise capable of benefiting from instruction. PL 94-142 elaborates upon the *Vocational Rehabilitation Act*, and further requires that handicapped children be provided with special services when needed in addition to the reasonable accommodations required by the earlier law.
To be in compliance with PL 94-142, school systems, with the cooperation of physical educators, must develop a continuum of available educational placements for handicapped children.	Presently in most school systems, only one or two physical education placements are available to students—the regular physical education class and/or the special physical education class. (Other alternatives include intramural and interscholastic sports; however, since these activities are not considered to be part of physical education by law, they may not be considered as placements.) Physical educators need to be leaders in their school systems in developing new alternative physical education placements for students.
Placement of handicapped children into least restrictive environments will result in many mildly handicapped children being placed into regular physical education classes. This is a desirable change for these youngsters, since physical education may be the curricular area in which they have the best chance to succeed alongside normal peers. *Regular physical education teachers* must acquire the skills needed to effectively teach these children.	Inservice programs are needed to help *regular physical education teachers* to develop the competencies they need to effectively teach mildly handicapped children. Preservice programs in colleges and universities must prepare future teachers for their responsibilities in the education of both handicapped and nonhandicapped children.
Just as many mildly handicapped children will move from specialized to normal environments, many moderately and severely handicapped children will be educated in environments that are more normal for them. Some of these children will come into contact with a physical education teacher for the first time as a result of this move. More adapted physical education *specialists* will be needed to serve those children who are moderately and severely handicapped. Also, specialists now working in the schools will come into more contact with the severely and profoundly handicapped than before. They should be prepared to teach these children.	Inservice training programs should be offered to assist adapted physical education *specialists* to serve the moderately, severely, and profoundly handicapped populations more effectively. Colleges and universities should prepare more individuals for careers as adapted physical education *specialists*.

Due Process

Due process is a legal term which means protection of rights under the law. PL 94-142 prevents discrimination against handicapped children in education by protecting the rights of handicapped children to a quality education. The due process provision of this law has two important implications for the education process.

The first implication is that parents, as representatives of their handicapped child, are viewed in PL 94-142 as partners of school officials in any decision-making concerning their child. Such decisions usually involve the need for special testing or the need for a change in educational placement for the child. When decisions must be made regarding special testing or placement changes, the school officials must notify the parents in writing, and must schedule a mutually convenient meeting of the parents and school staff. In most cases, such educational decisions are made at the individualized educational program conference (IEP conference) for the child. In addition to providing for parental input in decision-making, PL 94-142 also protects the rights of handicapped children to a quality education by establishing procedures of redress to be used whenever the parent or school officials feel that the child is not being served adequately.

Secondly, the due process provision affects the testing and evaluation procedures used in public schools. The PL 94-142 guidelines provide that all tests administered to handicapped children:

(a) be provided and administered in the child's native language or other mode of communication unless it is not feasible to do so,

(b) be validated for the purpose for which they are used, and

(c) be administered by personnel trained in testing procedures.

The guidelines further indicate that whenever testing and evaluation is conducted for purposes of determining changes in educational placements:

(a) the child must be assessed in all curriculum and ability areas to determine their educational need,

(b) no single procedure may be used as the sole criterion for determining an appropriate educational program for a child, and

(c) the evaluation must be a multi-disciplinary effort.

In physical education, the due process provision affects teaching practices in the following ways:

Implications of PL 94-142	Challenge to Physical Educators
The provision that parents be involved in educational decision-making should not require changes in the teaching behavior of physical educators.	Physical educators, like all other school personnel, should be aware that parents are involved in the decision-making process, and should learn to communicate effectively with parents.
The provision that testing be administered in the child's native language or mode of communication implies that some physical educators in every school system should be multi-lingual or be capable of using alternate communication systems such as Braille, sign language, or coacting.	Inservice training in alternate communication systems or other languages should be offered to some teachers in every school system. Preservice training of future teachers should involve learning an alternate communication system or other language. The hiring policies of school systems should reflect the need to have teachers who can speak more than one language or can use alternate communication systems.
PL 94-142 requires that tests be administered by trained personnel. At present, many physical education teachers may be uncomfortable in their roles as diagnosticians. In the past these teachers have not been called upon to make decisions regarding placements of children. Many physical educators are not aware of appropriate testing devices to use with handicapped children, and have not been trained in the methods of administering these tests.	Inservice training programs are needed to help both *regular physical education teachers* and adapted physical education *specialists* to become more competent in their roles as diagnosticians. Preservice training of future teachers should involve extensive training in selection and administration of motor fitness and skills tests. Content referenced testing is the essential form of measurement. This enables direct relationship between assessment and program. Testing is for the purpose of making relevant instructional decisions.

Implications of PL 94-142	Challenges to Physical Educators
	Physical educators should consider creating a new role to be filled by a few select teachers in the school systems. It may be advisable to create the role of motor diagnostician, an individual who might be responsible for testing handicapped children throughout an entire school system.
According to PL 94-142, tests must be validated for the purposes for which they are used. In physical education, relatively few tests of motor ability and performance have been developed for use with handicapped children. Many of the tests in common use are of questionable reliability and validity.	Efforts to develop valid and reliable test measures should be supported financially. Similarly, research into testing procedures should be supported.
The PL 94-142 guidelines insure that testing for the purpose of determining appropriate placement of handicapped children should be multidisciplinary in nature and must involve all curricular and ability areas related to the suspected disability. Many handicapped children exhibit motor proficiency levels quite unlike their academic or cognitive levels. Educational placement decisions should reflect these differences in abilities. The physical educator is the person best able to determine a child's appropriate placement in physical education.	If physical education personnel are to do a good job of testing handicapped children for purposes of placement, and if they are to participate on committees to determine appropriate educational services for handicapped children, they need release time from their teaching duties.

Individualized Educational Plans

By law every handicapped child who requires special services should be provided with an individualized education program (IEP) which details the nature of any special services to be provided. The IEP is developed at an (IEP) conference by a committee whose membership must include:

(1) a paid professional of the school (usually a principal or counselor),
(2) the child's teacher or teachers,
(3) one or both parents, and
(4) the child when appropriate.

This committee develops a written statement outlining the educational services which will be provided to the child and determines the appropriate, least restrictive environment for the child in each curricular area.

The written IEP must include the following six items:

(1) the child's present level of performance in each curricular area;
(2) long range goals and short term objectives;
(3) a specification of the special educational services and materials which will be provided to help accomplish these goals;
(4) a statement of the extent to which the child will be integrated with nonhandicapped children in regular school programs;
(5) a timetable of when special services will begin and how long each service or program will be offered; and
(6) a statement of when and how the child's performance and effectiveness of the plan will be evaluated.

The IEP is a legally binding document. School officials are obligated to provide the services designated in the IEP, but are *not* held accountable for the child's progress.

The IEP provision of PL 94-142 affects physical educators in numerous ways:

PL 94-142: IMPLICATIONS FOR PHYSICAL EDUCATORS

Implications of PL 94-142	Challenges to Physical Educators
Physical educators should participate on IEP committees. By law, at least one of the child's teachers must be on the committee. Since many children perform differently in the physical education setting than in the academic realm, the contribution of the physical education teacher on the IEP committee should be welcomed.	By participating on the IEP committee, the physical educator has the opportunity to improve educational services for handicapped children. By participating on IEP committees, the physical educator has some influence over the student composition of his or her physical education classes. By participating on IEP committees, the physical educator has the opportunity to perform in a public relations role for his or her profession. Many administrators and regular class teachers do not regard physical education as an academic area or as a curriculum area with important values and benefits for children. In the multi-disciplinary setting of the IEP conference, the physical educator can help to erase these myths.
If physical education teachers are to be effective in planning educational services for handicapped children, and if they are to participate on IEP committees, they will need release time from teaching duties.	Physical education teachers are typically overworked. They are often burdened by large class sizes. Since many physical education classes do not meet daily, physical education teachers have disproportionately higher pupil loads in comparison to teachers in other curriculum areas. Physical educators need release time from teaching duties to permit time for evaluating children, writing learning objectives (IEP), and for participating on IEP committees. Teachers should enlist the aid of PTA groups, teachers' unions and educational associations to this end.
IEPs are legally binding documents. As such, teachers and school systems are accountable for providing the services enumerated in the IEP.	Physical educators, as well as other teachers, are accountable for providing effective teaching services. Good teachers have always developed effective plans for the education of their students and have followed their plans. PL 94-142 is requiring all teachers to do what good teachers have always done.
Valid and reliable testing devices are needed to evaluate students' current levels of motor abilities and to evaluate whether learning objectives have been achieved.	Financial support is needed for test development and research on motor fitness and performance.
Teachers must be prepared to specify the special services and materials which are needed in the physical education of handicapped children.	School systems are obligated to provide the services and materials listed in an IEP. Physical educators can sometimes obtain additional equipment and personnel assistance if justification for these services is provided in an IEP.

Summary

Many changes in teaching practices must occur if handicapped children are to benefit maximally from the enactment of PL 94-142. Physical educators face the following challenges in improving educational services to handicapped children:

(1) *Regular physical education teachers* who are now working need additional inservice training in methods of teaching mildly handicapped children, assessment of motor fitness and performance of handicapped children, appropriate educational planning for preschool handicapped children, and possible training in alternate communication systems. These teachers also need release time from teaching duties to perform non-teaching duties related to the education of handicapped children.

(2) *Specialists in adapted physical education* who are

now working need inservice training to help them develop the competencies needed for effectively educating the severely and profoundly handicapped child, learning alternate communication systems, improving their abilities in the area of assessment, and learning how to plan educational programs for preschool handicapped children. The role of the specialist need to be differentiated from the roles of the physical, occupational, and recreational therapists who also serve handicapped populations. Specialists, like regular physical education teachers, need release time from teaching duties for non-teaching duties related to the education of handicapped children.

(3) *Colleges and universities* which offer preservice training programs for prospective teachers need to train more specialists in adapted physical education. These institutions should also revise their training curricula so as to prepare future teachers for changes which have occurred in educational practices as a result of PL 94-142.

(4) *Research programs and motor test development* efforts in the area of physical education for handicapped populations need financial support. Such research and test development is critically needed in order to provide teachers with the knowledge and evaluation devices they need to effectively educate handicapped children.

Only when these challenges have been met will physical educators be offering quality physical education services to handicapped children. Only then will handicapped children accrue the benefits which result from participation in physical education programs.

Self Evaluation: PL 94-142 Implications for Physical Educators

Questions:

1. PL 94-142 calls for the provision of physical education for

   (a) all handicapped children of elementary age and above (ages 6-18 or 21).

   (b) all handicapped children not requiring the use of special support services.

   (c) all handicapped children regardless of age or severity of handicap.

   (d) all mildly and moderately handicapped children regardless of age.

2. What are some of the related services provided for under PL 94-142 which may be useful to physical educators working with handicapped children?

3. How does the concept of "least restrictive environment" apply to the choice of physical education classes to which a handicapped student is assigned?

4. In addition to insuring that parents are involved in making decisions regarding their child's physical education and providing an opportunity for redress in cases where parents are dissatisfied with the services being provided, name two other aspects of the due process provision which affect the physical education of handicapped children.

5. Complete the following statement: "Physical education should be . . ."

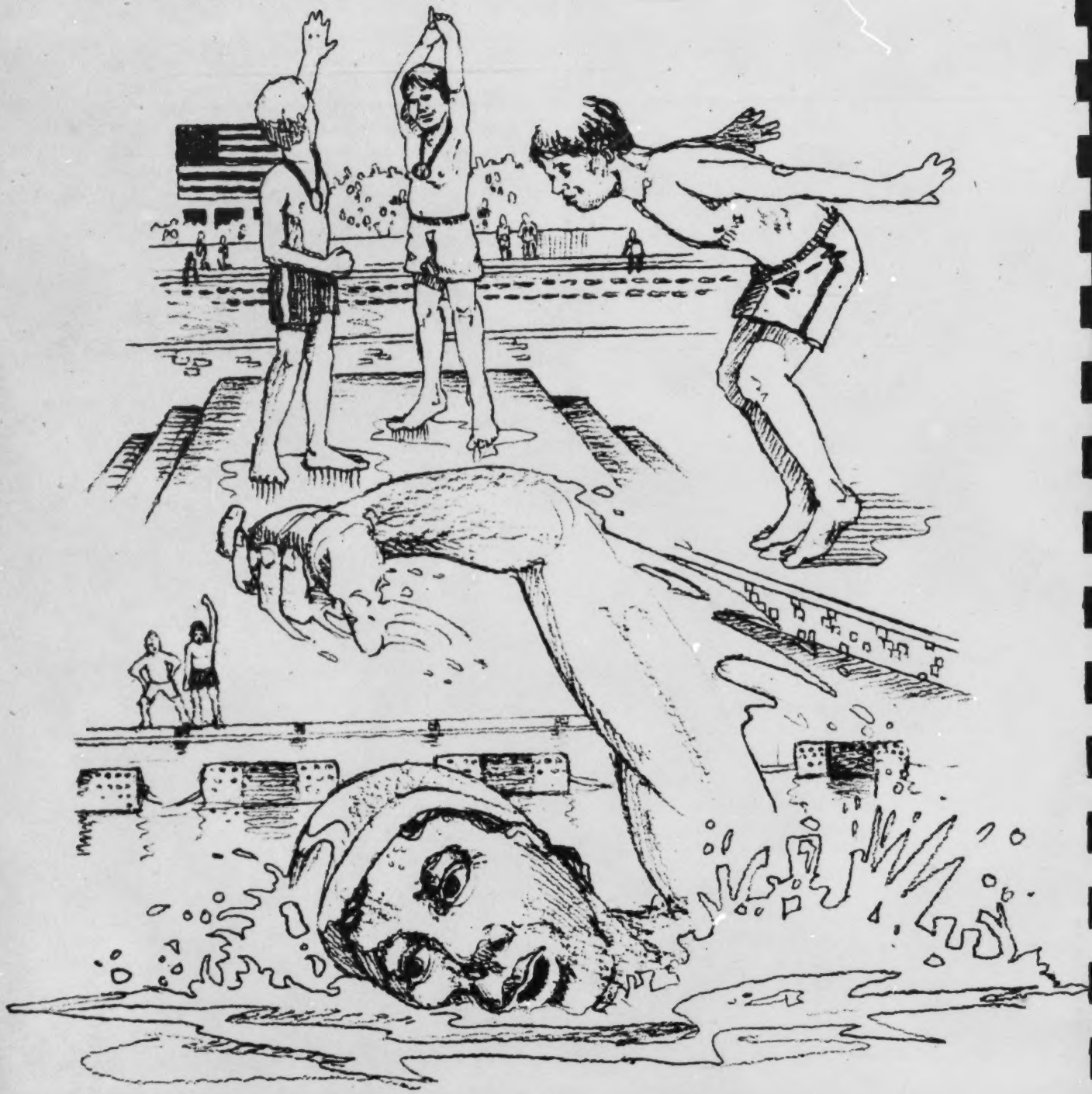
   (a) considered in the assessment of each child but not included in an IEP unless special physical education services are deemed necessary.

   (b) included in every child's IEP.

   (c) included only at the discretion of the special services board.

Answers:

1. (c)
2. • occupational therapy
   • physical therapy
   • therapeutic recreation
3. Least restrictive environments are those in which the handicapped child is placed in the most normal setting in which he/she can succeed. While a particular child may benefit from instruction in a specialized physical education class, if possible, the handicapped child should be placed with his or her nonhandicapped peers, regardless of the "label" applied to that student, and his/her placement in other classes.
4. • testing should be administered in the child's native language
   • tests must be administered by trained personnel
   • tests must be validated for the purposes for which they are used
   • testing must be multi-disciplinary in nature
5. (b)



PL 94-142: IMPLICATIONS FOR RECREATION LEADERS

In November of 1975 the United States Congress enacted Public Law 94-142 entitled The Education of All Handicapped Children Act. This act was the culmination of many years of effort by educators, legislators, handicapped persons, advocates and others to insure that all handicapped children receive a "free, appropriate public education". A key word is the word *appropriate*. Previous legislation has called for public education and had provided federal funds and technical assistance to promote this education for handicapped children, but PL 94-142 requires an "appropriate" public education and then very carefully defines what is meant by an appropriate education. In this definition emphasis is placed on meeting the special unique needs of each individual handicapped child and on the provisions of comprehensive services necessary to meet these needs.

A free, appropriate education is defined as "Special Education and *related services* which are: (1) provided at public expense; (2) meet the standards of the state education agency; (3) include preschool, elementary or secondary school in the state involved; and (4) are provided in conformity with an individualized education program. Related services as are required to assist a handicapped child to benefit from special education include speech pathology and audiology, psychological services, physical and occupational therapy, *recreation*, and medical and counseling services . . ."

Finally, recreation is defined as including: "(1) assessment of leisure function; (2) therapeutic recreation; (3) recreation programs in schools and communities; and (4) leisure education". As a related service these listed recreation services are authorized if the individualized education plan determines they are required to "assist the child to better benefit from special education". The local education agency is also authorized to purchase whatever services are required to implement a child's educational plan if they are not available within the school setting.

Thus it is clear that PL 94-142 opens the way for recreation and leisure services professionals to provide their expertise to the total education of handicapped children. It is also clear that if recreation services are going to be utilized they must be included in the individualized eudcation plan. Educators, parents and other members of the planning committees will need to better understand just what recreation is, what it can contribute to the education of the handicapped child, and where such services can be acquired.

The purpose of this guide is to attempt to provide this information and to define as clearly as possible the role that recreation and leisure services and professionals can assume in the total education of handicapped individuals. This guide will also attempt to outline strategies and implementation guidelines necessary to articulate this role to educators, parents, recreation specialists and others at the national, local and state levels.

Statement of Position

It is the position of this guide that recreation and leisure services should not be considered solely as a "related service". The concept of related services in the law implies that these services should be provided only when they are deemed necessary to "assist the child to better benefit from special education". Most of the services included under related services are solely corrective or remedial in nature and are provided for selected individuals who have specific problems such as speech and hearing and physical therapy. On the other hand, all handicapped children must learn to appreciate and effectively utilize leisure time. For example, all children do not have a speech or hearing problem that would require speech and auditory services, but all children do have leisure time that will play an important role in their total development. All children do not have atrophied limbs that require the services of a physical therapist, but all children do have the need for learning appropriate play and recreation skills. In fact, for many handicapped children who will be served through PL 94-142, leisure time will comprise most of their lives, since vocational goals will not be completely attainable. For these reasons, the position taken in this guide is that recreation and leisure services should be seen as an integral part of the total education program of all handicapped children and can play a very significant role in assisting individuals to develop to their maximum potential and function as independently as

possible in all realms of life. This position has been supported by the 1977 Annual Report of The National Advisory Committee on the Handicapped which states:

> Developing motor skills and motor control, taking part in games and sports, learning to participate in recreation and leisure activities—these are important to the well-being of all persons. They are at least equally so, for those with handicaps, not simply in terms of the individuals' health but in building self-confidence and in opening doors for fuller participation in the larger society.

It is this position that the remainder of this guide will attempt to articulate and to support. Specific methods for utilizing recreation services will be outlined.

Historical Background and Definition of Terms

Over the past ten years the Bureau of Education for the Handicapped has taken a leadership role in the concern for recreation services and opportunities for handicapped children. In 1967, PL 90-170, The Mental Retardation Amendments created a special program in Physical Education and Recreation with authorization to provide funds for training and research efforts in these two areas. Since the development of this program, over twenty colleges and universities have received training support and several significant research projects have been funded.

Presently, PL 94-142 continues these training and research efforts and includes recreation services as an important aspect of an appropriate education. The regulations developed to implement the law state that: "Recreation includes (1) assessment of leisure functioning; (2) therapeutic recreation; (3) recreation in schools and community agencies; and (4) leisure education." In order to better understand the role of recreation in education these terms will be defined and explained.

Assessment of Leisure Functioning

Assessment of leisure functioning is the first term included in the definition of recreation. It is a logical and *necessary* step in beginning to provide *necessary* recreation and leisure services. The primary force of current educational programs for handicapped children is to determine the present level of educational performance in order to identify the child's strengths and weaknesses and to plan services in relationship to these strengths and weaknesses. In order to determine the type of recreation and leisure services needed one must first assess the current level of recreation and leisure skills, knowledge, and abilities possessed by the individual.

A great deal of apprehension has been expressed regarding the exact definition of and methods for assessment of leisure functioning. This apprehension stems from some of the existing realistic concerns over the types of childhood assessment that have led to the intricate regulations involving "non-discriminatory testing." It is not the intent of this guide to equate assessment of leisure functioning with the more sophisticated assessment methodologies being utilized in intelligence testing on other areas of development. Granted, much work needs to be done in the area of assessment methodologies and instrumentation. The intent of "assessment of leisure functions" is to determine the present level of skills, knowledge, abilities and attitudes possessed by the child relative to recreation and leisure time participation. Most of this information can be gathered through observation and interviews with the child and his/her family. This assessment of leisure functioning should include the following components:

(1) The child's functional abilities to participate in a wide variety of leisure activities.

(2) The child's knowledge of the wide range of recreation and leisure activities which are available.

(3) The present attitudes toward recreation and leisure held by the child and the child's parents.

(4) The knowledge of the resources available in the child's community for leisure participation.

(5) The level or ability of the child to participate independently in recreation activities.

Once this type of information is known, appropriate recreation services can be provided upon the child's strengths and help to ameliorate their handicap. The information gathered from this assessment can also be interrelated with the overall assessment of other functional abilities to determine areas in which recreation services can be utilized to support other educational goals.

Therapeutic Recreation

Therapeutic recreation is listed as a special service within the definition of recreation because it is a special service within the broad field of recreation services. Therapeutic recreation can be compared in its relationship to recreation much as special education is to education. Therapeutic recreation is provided by recreation specialists who have been trained to provide services to handicapped individuals and to provide these services not only as an end in themselves but as a means to a greater end such as education, rehabilitation or specific treatment of education goals and objectives. Implied in the provision of therapeutic recreation services is an initial assessment of the individual being served, a statement of goals and objectives based on that assessment, programming to reach the goals, and evaluation to determine if the goals have been met. The

primary goal of therapeutic recreation is to assist the child to be able to function as independently as possible in recreation and leisure activities and to assume that the recreation program is in agreement with all other education goals and objectives.

Recreation in Schools and Communities

The phrase recreation in schools and communities contains two components both of which are important in achieving the provision of equal opportunity in the "least restrictive environment." The first part of the definition includes recreation in the schools. In most schools, extracurricular activities are increasingly becoming a very important part of the school environment. For the most part, these activities have not been provided for handicapped children. The offical regulation states that each "agency shall take steps to provide non-academic and extracurricular services and activities in such a manner as is necessary to afford handicapped children an equal opportunity for participation . . ." The regulations state further that these activities may include athletics, recreational activities, and special interest groups and clubs. It is clear that these kinds of recreation activities should be as accessible to handicapped children as to non-handicapped.

The second part of this component includes "recreation in community agencies". One of the primary objectives of all special education services is to enable the child to function at the highest possible level of independence in all realms of life. One important part of this should be independent functioning in community recreation agencies. Almost every community provides a public supported recreation and sports program as a public service to its citizens. Many of these public agencies also provide special services for the handicapped individual. In many instances these community based recreation programs can provide important and necessary services which are not readily available in the public schools. Utilization of these services can also provide a bridge from the school into the community and can facilitate the child's ability to function in the mainstream of society. Closer articulation between the school and the public recreation agency would provide more comprehensive services for handicapped children as well as more economic usage of tax dollars.

Leisure Education

The final component of recreation as defined by the regulations is leisure education. In the context of the regulations, leisure education is a newly discussed curriculum area for what has long been one of the cardinal priciples of education, namely, instruction to enable the student to achieve "worthy use of leisure

time". With the increased emphasis on educating people for full participation in life rather than focusing solely on academic skills, increased attention has been placed on the development of instructional components which prepare the student to make the best possible use of leisure time. According to Lancaster and Odum (1976), included in this curricula should be:

(1) An appreciation of the use of leisure time as an avenue for personal satisfaction and enrichment;

(2) An understanding of the array of valuable opportunities available;

(3) An understanding of the significant impact that leisure time has and will have on society;

(4) An appreciation of the natural resources and their relationship to discretionary time and the quality of life; and

(5) The ability to make decisions regarding their own leisure behavior.

Leisure education means a specific program that would prepare the child for the optimum participation as independently as possible in leisure activities. Components included are:

(1) Development of positive attitudes toward leisure;

(2) Development of skills necessary in order to participate in leisure activities;

(3) Knowledge of leisure resources in one's community; and

(4) Experience in participation in leisure programs as the highest level of independence possible.

Role of Recreation in Education

Although the importance of recreation and leisure to total education has received new impetus in recent years, and PL 94-142 emphasizes its role in services to handicapped children, it is not a new idea. John Dewey is quoted as saying:

> Education has no more serious responsiblity than the making of adequate provision for enjoyment of recreative leisure, not only for the sake of immediate health . . . but for the sake of its lasting effect upon the habits of the mind (Brightbill, 1960).

In 1918, the Commission of The Reorganization of Secondary Education issued The Cardinal Principles of Secondary Education which states in part:

> . . . every individual should have a margin of time for the cultivation of personal and social interests. This leisure, if worthily used, will recreate his powers and enlarge and enrich life, thereby making him better able to meet his responsibilities. . . (Hawkins, 1975).

In the late 1960's, The United Nations' Educational, Scientific and Cultural Organization (UNESCO) adopted a charter for leisure. Article Six of that Charter states:

> Everyman has a right to the opportunity for learning how to enjoy his leisure time. Family, School and Community should instruct him in the art of exploiting his leisure time in the most sensible fashion (Hawkins, 1975).

In spite of this expressed concern for leisure, the public school systems have done little to promote leisure as an educational goal. In fact, with the emphasis on vocational and academic skills and with the influence of the "Puritan Work Ethic", leisure goals have not only been omitted from the school curricula but have even been subtly denigrated.

In recent years, however, there have been some gradual changes in the outlook toward leisure and its use. As the amount of time people must spend on work and life maintenance tasks decreases and leisure increases, emphasis on how one uses his leisure has also increased. As automation and technology have made jobs monotonous and routine, leisure pursuits are beginning to be studied as the means for giving a person a feeling of identity and accomplishment. And, as the impact of the puritan work ethic decreases, traditional views of leisure being antithetical to work must also be studied and re-thought.

Public Law 94-142 calls for an appropriate education, based on each child's individual needs and geared to helping the child reach the maximum level of functioning. With the emphasis on services to all handicapped children including the severely disabled, school systems must first assist each child to function as independently as possible in leisure. Secondly, they must realize that for many children with severe disabilities employment will not be a primary goal. Thus, "worthy use of leisure time" should again be considered as one of the paramount goals of education.

Relationship to Other Educational Goals

As well as providing a necessary service to enable individuals to attain a quality of life, there are specific functions that recreation services can perform which are directly related to traditional educational goals. By developing recreation services as an integral part of the education program they can also serve to reinforce and support these educational goals. Some of these goals are as follows:

Use of Play to Promote Growth and Development

Perhaps the primary media of the recreation professional is the media of play. The importance of play and play pattern development has long been discussed by early educators and child development specialists. John Dewey stated that: ". . . the play life of the child must be considered an educative agent and that the child perhaps learns more and develops better through play than through any other form of activity" (Lehman and Witty, 1927). Erikson and Piaget have denoted extensive writing to the developmental nature of play behavior in children. They both outline the beginning of play in the young infant that centers on reflex actions, moves then to the world of sharing with others (Erikson, 1963; Piaget, 1962). Parten supported these theories with his extensive observation of the play behavior of a large group of preschool children between the ages of two and five. From his observations he outlined six types of play behavior. They were:

(1) Unoccupied behavior
(2) Onlooker behavior
(3) Solitary independent play
(4) Parallel activity
(5) Associative play
(6) Cooperative or organized play.

The findings of Parten's study were that the younger children engaged primarily in the first three types of activities, while the older children displayed the latter three. He concluded that as the children mature they

develop skills and competencies that enable them to move from solitary play to cooperative interaction with others. Parten, Erikson, and Piaget all imply that if blockages occur in the opportunities for the development of higher degrees of play behavior, the individual will experience problems in social interaction.

Recreation services, by concentrating on play behavior, can structure play experiences so that the child can learn and develop the skills necessary to progress along the developmental continuum toward cooperative play and more appropriate social behavior.

Recreation and Socialization

Recreation services can be utilized as a major means of fostering social interaction and the ability to get along appropriately with other people. Often games and play situations are the first experiences that children have which require adherence to set rules and in which one's behavior is contingent upon group sanctions. Recreation is also the primary means for handicapped persons to practice social skills in a somewhat protected environment; by structuring experiences in relationship to the needs of students, increased independence can be fostered through participation in increasingly unsheltered settings.

Redle and Wineman have stated:

> Practically all so-called social skills needed in any society can be translated into some game activities which combine the value of acculturation and socialization with the experience of happiness and fun in the process.

They further support this statement by reporting in their use of recreation and game activities to promote internal control of behavior by impulsive, aggressive adolescents (Redle and Wineman, 1952).

The importance of socialization skills cannot be underestimated. The ability to be accepted as a member of the group—to make friends and to particiapte in the mainstream—is crucial to independent adjustment. Many handicapped children never have the opportunity to learn social interaction skills simply because they have been denied the right to participate in normal recreation experiences.

Promotion of Normal Growth and Development

Recreation activities and basic play behaviors can be utilized to promote normal growth and development. Often severely handicapped children, with very few communication skills and low social maturity, can be reached and motivated through play and game activities. Many examples of programs with severely and profoundly handicapped children have demonstrated that once motivated human potential can often exceed expectations.

A prime example of this type of progress was the experiences of the San Francisco Recreation Center for Handicapped during the 1950's. Services were begun, at that time, for severely handicapped children who, because of lack of functional ability, were denied admittance to the public school system. Many of the children, after being involved in the recreation program for a period of time, improved sufficiently in physical, social, emotional and self-help skills and general maturation to be accepted in the special classes within the public schools. With PL 94-142 placing emphasis on services to all handicapped children many severely handicapped persons may be best reached by the development of simliar recreation services (Pomeroy, 1969).

Reinforcement of Academic Skills

Learning basic concepts such as directionality, colors, numbers and spelling are the foundation upon which academic development is built. For children who are not quite ready for formal learning situations, these concepts can be introduced through participation in play and game activities. Also, by coordinating recreation programs and activities with the instructional program, academic skills being taught in the classroom can be reinforced and strengthened through structured play activities. In order to provide for this type of interrelationship, it is imperative that the recreation specialist maintain close contact with the rest of the education team and be a part of the individualized education program.

Continuum of Services

Another important function of recreation services is the provision of a continuum of activities that extend from the school into the home with the family. One difficul-

ty with many special education programs is the lack of continuity once the child leaves the school in the afternoon, on weekends, and throughout the summer months when school is not in session. Closer coordination between school systems and community recreation programs could support the same goals and objectives for the child throughout the year.

Presently, many school systems and recreation agencies are funded by the public tax dollar, program for the same children, and often utilize the same facilities. Typically, these services are provided with little or no coordination and planning between the two agencies. Such communication and planning between the two would greatly facilitate the growth, development and education of the child. One major difficulty in closer articulation is the fact that the school and the public recreation program are often sponsored by different tax based funding programs. However, with demands for better fiscal accountability these difficulties may be thoroughly examined and solutions started.

Recommendations for Action

As was stated in the introduction to this guide, PL 94-142 provides the opportunity for recreation specialists and those in the therapeutic recreation profession to provide very valuable and necessary services to handicapped children. These services can be provided within the school system itself through the employment of therapeutic recreation specialists within the departments of education. They could be provided through exchange agreements with public recreation agencies or they can be provided through consultation arrangements with individuals or agencies providing such services. If, however, they are going to be provided, the recreation profession as a whole and the therapeutic recreation profession specifically will have to take the initiative in selling the benefits of these services to the educational communities at the national, state, and local levels. The rationale and benefits have been articulated and substantiated and in instances where educational efforts have been made the educational communities have been extremely receptive.

For example, a recent study was conducted to determine the current status of recreation in special education in comparison with the preferred status, as perceived by State Directors of Special Education (Ellis, 1978). The study includes 14 statements relative to five specific areas of recreation services. These five areas include: (1) the use of recreation in education programming; (2) qualifications of therapeutic recreation personnel used in the school system; (3) assessment of leisure functioning; (4) inservice training policies; and (5) involvement of therapeutic recreation personnel at the State Education agency. Based on a five point rating scale with a rating of one indicating that the condition does not exist at all, and a rating of five indicating that the condition exists to a very large extent, the mean rating for all 14 items yielded a rating of 1.8. In contrast the mean rating when asked to what extent should the condition exist, yielded a rating of 3.7. These results clearly indicate that State Directors of Special Education feel that recreation and leisure services should exist within the schools to a fairly large extent. It is fairly safe to assume that if State Directors feel positively inclined toward the use of recreation services, other educational personnel will react the same way.

In order to facilitate adequate and appropriate articulation with the educational community, handicapped individuals themselves and parents of the handicapped, the following strategies are recommended:

(1) *All recreation and therapeutic recreation specialists must become convinced themselves, that recreation should be a major part of the education of handicapped children.*

We as professionals must become much more assured that we have a valuable service to provide, and be confident in our knowledge, skill and ability to provide those services. We cannot change societal and professional attitudes toward recreation if we ourselves continue to promote them in a self-denigrating, and apologetic manner. If we are not convinced of our value, we will be totally unable to convince anyone else.

(2) *We must begin to conceptualize our services in the terms of the educational community.*

For years we have promoted recreation as an end in and of itself. We have stated that recreation is a basic human need and that everyone, including the handicapped must have outlets for recreation participation in order to maintain balance. This rationale is simply not enough to accomplish the changes necessary to establish recreation as an integral part of the educational system. In fact, most educators would agree with these statements, but would question the role of the traditional education system to provide it. If we are to sell recreation as a necessary part of the total education of children we must be able to show how recreation services can assist the child in reaching educational goals and individualized education plans and be able to show how our services contribute to achieving specifically stated goals and objectives. The information presented in this guide should assist in this task.

(3) *We must effectively articulate this information to the educational community at the national, state, and local levels.*

One major problem in attempting to change attitudes

toward the role of recreation in education has been the lack of systematic procedures and the lack of consensus in methods and techniques. The purpose of this guide has been to attempt to organize theories and practices in such a way as to provide a clear, definitive statement that can be utilized by all recreation professionals working together. Once a definitive statement is endorsed it then must be articulated to the educational community. Efforts should continue toward active involvement of recreation in the legislative process at the national level. Articles and presentations should be developed and addressed to the educational specialist rather than to the recreation practitioner, and these materials should be disseminated at the national, state and local levels. Most importantly, we as recreation specialists should establish and maintain close contact with educators, parents, and handicapped individuals alike so that when meetings, conferences and workshops are held concerning the education of handicapped children, our professional services will be included.

(4) *Therapeutic recreation personnel must become involved in the state planning process.*

PL 94-142 as well as most other federal legislation that provide funds to the states require that each state develop a state plan. This plan is to outline exactly how the state intends to implement the requirements of the federal law. Most states are required by state regulations to provide for public involvement of such state plans. If recreation is to be included in state plans and consequently in implementation of services, the professional bodies concerned with recreation must be involved in the planning process. During the past three years some states with active therapeutic recreation organizations have responded to public involvement and have facilitated substantive inclusion of recreation services in the state plans. In many other instances, however, involvement of recreation has been extremely minimal.

(5) *Finally, and most importantly, we must effectively demonstrate that our services do, in fact, contribute to the growth and development of handicapped children.*

It is one thing to be able to articulate the theories and philosophy of recreation, but in the final analysis we must be able to effectively demonstrate that our services do make contributions to the education of handicapped children. This means providing effectively designed and implemented services that are related to specifically stated goals and effective accounting procedures to show that, as a result of our services, changes did occur and that goals were met. In short, we must not only be able to articulate what we do and why we do it, but we must also be able to deliver the results that we say we can. *This* is the accountability the public tax dollar and subsequently, the public education system will require.

Self Evaluation: Implications for Recreators

Questions:

1. Under the provisions of PL 94-142, recreation is provided as a _____ in a child's IEP.
2. Name at least three components of the assessment of a child's leisure functioning.
3. _____ means a specific program that would prepare the child for the optimum participation as independently as possible in leisure activities.
4. What are some of the reasons for emphasizing the role of recreation in the life of a handicapped child?

Answers:

1. related service
2. (1) The child's functional abilities to participate in a wide variety of leisure activities.

   (2) The child's knowledge of the wide range of recreation and leisure activities which are available.

   (3) The present attitudes toward recreation and leisure held by the child and the child's parents.

   (4) The knowledge of the resources available in the child's community for leisure participation.

   (5) The level or ability of the child to participate independently in recreation activities.
3. leisure education
4. • he/she may have many hours of leisure time if full employment is not possible
   • play is essential in promoting individual growth and development
   • means of fostering social interactions and appropriate relations with other people
   • reinforcement of academic skills

10

PL 94-142: IMPLICATIONS FOR ADMINISTRATORS

The Education for All Handicapped Children Act (PL 94-142) gives a clear and precise mandate for the inclusion of physical education and recreation into the individual education program (IEP) of each handicapped child. In addition, it is the clear intent of the law that handicapped children participate in physical education and recreation programs in the "least restrictive environment" available as defined by members of the IEP committee. Obviously, the school administrator will have a crucial role in the carrying out of the provisions of the law smoothly. His role as decision maker will have a strong effect on the type and quality of the curriculum as well as on the impact this curriculum has on students, staff, parents and the community. As the "spokesperson for education", the administrator *must* advocate physical education and recreation programs for the handicapped and should be aware of the implications of such programs on teachers, students, parents and the community.

The administrator, as the educational leader, receives demands from parents, advocacy groups, and the board of education, etc. These demands for reforms are often presented with no opportunity by the administrator for rebuttal. The administrator's response to demands, evaluation of needs and judgments will not only set the tone for the curriculum but will also play an important part in the success of the entire program. As the spokesperson for the school system, it is incumbent upon the administrator to advocate physical education and recreation as a viable component of the curricular structure. Because the administrator must make financial decisions, he will also be required to make pragmatic decisions about the allocation of additional resources. In addition, his decisions reflect the philosophy under which the physical education and recreation programs would operate. The adminstrator will want to thoroughly evaluate the needs of the students, his own budgetary constraints, necessary staff development, curriculum content and available resources in order to insure the proper implementation of PL 94-142.

Areas for Evaluation

Although there will always be differences among school systems as to organization, goals, delivery systems, pupil-teacher ratio, etc., there are nine areas that all administrators should evaluate in order to prepare to implement PL 94-142. These are: philosophical questions, budgetary requirements, staff development, curriculum content and approach, curriculum logistics and implementation, cultural and familial considerations, learning resources, and evaluation methods.

It will be necessary for the adminstrator to fully evaluate the importance of physical education and recreation to handicapped students, their parents, teachers and the community as a whole. It is of utmost importance that everyone involved in the delivery system of physical education to the child share a common philosophy that it is a necessary and viable alternative in the curriculum and enhances children's growth in many ways. The administrator needs to investigate how the physical education and recreation program can fit into the existing curriculum easily or be adapted as an entity in itself.

Adminstrators must be aware of the costs involved in implementing a physical education and recreation program, especially those of personnel, transportation, learning resources, training, etc. Whether or not the infusion of the new curriculum will be cost effective should also be carefully assessed.

In order to evaluate staff development, administrators will have to identify the competencies available in existing staff for implementing a physical education and recreation program. Perhaps available staff members are capable of designing, developing and conducting the physical education and recreation program. Or the administrator will need to identify those staff members requiring pre-service training to upgrade their capabilities. The possibility of inservice training for staff members as well as for parents and other relevant personnel should be carefully studied.

The administrator will have a crucial role in making decisions involving curriculum content and approach. The following questions should be considered: "Should the physical education and recreation curriculum effort be one of infusion?"; or "To what degree should the curriculum be developmental in nature?" The administrator will want to determine whether the curriculum should focus on the development of skills only,

or also attitudes, knowledge, or appreciation—or a combination of all of these. Whether the curriculum should be based on an individual skill level (criterion referenced) or on the age or diagnostic category (normative) of the children should be investigated. The relationship of the curriculum to on-going or proposed mainstreaming efforts should be evaluated. Finally, the administrator will need to determine what goals and objectives should be developed for the physical education and recreation curriculum—whether to develop them in a general fashion, grade specific, diagnostic category specific, or level of function specific.

In order to evaluate the logistics and implementation of the new curriculum, the administrator will need to study specific layouts of classroom, gymnasium and playground setting. In addition, the transportation plans and resources, staff development, budgeting, and curricular materials necessary prior to implementation need to be identified. The processes necessary for the approval of the curriculum and any political dimensions also should be reviewed. Based on these considerations, the administrator should establish a time frame for the implementation process.

Administrators, when establishing goals and objectives, will want to consider the cultural heritage and potential uniqueness of the students. Learning activities should use appropriate ethnic examples taking into account neighborhood and community traditions, folkways, and cultural heritage. Sex-role stereotypes must be carefully avoided.

Learning resources should be very thoroughly evaluated by the administrator. He will want to be aware of what areas and facilities will be required by the new physical education and recreation programs. What kind of space, how much space and when the space will be needed are all questions the administrator needs to investigate. The specific materials (books, films, etc.) and specific equipment required for the learning activities must also be determined. Hopefully, existing equipment will be available for the program; if not, the administrator will have to decide what can be purchased. The administrator needs to become aware of existing learning resources in the school and community and their potential for use in the physical education program.

Every program should be evaluated for its impact as well as effectiveness. Methods for evaluation of students, teachers, and other staff should be developed. What methods to use, who should administer the evaluations, when they will be done, and how they will be analyzed are all questions the administrator should decide prior to implementation.

Design for Implementation

In order for the administrator to arrive at solutions to the above nine areas of concern and to carry them through to implementation, he needs to carefully identify his goals with respect to the new program and then provide the necessary leadership to make the program a reality. The following list of objectives and suggested tasks can be used as a guide by the administrator to implement a physical education program.[1] However, the suggested objectives and tasks outlined below can be applied to all areas of learning, e.g., recreation, education, etc. Each objective is based on the accomplishment of the preceding objective.

Objective	Suggested Tasks
1. To become familiar with physical education—its rationale, antecedents, principles, programmatic dimensions and concepts.	Review existing materials dealing with physical education. Visit other school systems where physical education has been implemented. Participate in discussions to become familiar with the philosophical basis of physical education. Develop a rationale for physical education and its use in your school system. Become involved in goal setting sessions for a physical education curriculum.
2. To develop an educational philosophy which is congruent with physical education concept.	Review the educational philosophies of individuals or school systems which have implemented a physical education curriculum to determine how the philosophies are reflected in their physical education concerns and/or programs.

Objective	Suggested Tasks
	Assume the role of parent, adult, other relevant person (social worker, vocational counselor, adjunctive therapists) and describe the problems, expectations, and potentials from the initiation of a physical education curriculum. Determine the relationship between physical education and career education. Put an educational philosophy in writing and determine whether it reflects physical education considerations. Revise the school system's philosophy to reflect physical education concerns more accurately.
3. To identify those educational areas in which change may be necessary due to the implementation of a physical education curriculum.	Participate in individual or group investigations to identify changes which will be necessary to accommodate a physical education curriculum. Identify the changes which will be necessitated by implementing a physical education curriculum.
4. To plan and conduct a comprehensive survey of students, parents, staff, and other relevant persons to determine their physical education attitudes, behaviors, and needs; to analyze and interpret this data.	Identify appropriate physical assessment efforts of an existing school system in which a physical education program has been implemented. Determine the physical education attitudes, behaviors, and needs of each selected population (students, parents, staff and other relevant persons) by using either pencil and paper inventories, tests, checklists, or accepted interview techniques or other data recording procedures. Analyze and interpret data. Prepare a written report which presents the physical education attitudes, behaviors, and needs of the selected population.
5. To identify and utilize community education resources, including areas and facilities, personnel, natural resources, etc., which would be available for use in the physical education curriculum.	Identify resource centers where educational brochures, pamphlets, books, audiovisual aids, and other materials on physical education are available. Develop liaison with professional, educational, occupational, and other organizations which provide input into the physical education curriculum. Survey local physical education resources. Acquire necessary resource material for use in the physical education curriculum. Design a plan for using existing resources, including areas and facilities, personnel, natural resources, equipment, materials and supplies.
6. To develop a sound financial management program plan prior to the implementation of the physical education curriculum.	Discuss with other administrators how the financial aspects of the physical education curriculum were handled. Review existing financing in the school system and suggest ways in which the physical education curriculum can be facilitated.

Objective	Suggested Tasks
	Develop a listing of procedures which should be followed in budgeting for physical education learning activities.
7. To plan, implement, and evaluate a physical education curriculum.	Identify the types of facilities and staff competencies needed for a physical education curriculum. Complete an evaluation of existing facility and staff strengths and weaknesses. Determine what additions, changes, if any, should be made in facilities and staff. Develop plans for the implementation of a physical education curriculum in the school system. Conduct necessary pre-service and inservice training for staff, parents, and other relevant persons prior to (and during) implementation. Determine the level of competence of students and identify entry-level competencies for each student. Implement the physical education curriculum. Participate as a member of the evaluation team.
8. To apply techniques and procedures of scientific management in developing a long-range plan for optimal implementation of a physical education curriculum.	Report on management techniques and procedures utilized in the existing and projected physical education curriculum. Develop district-wide long-range plan for physical education. Report on the developed plan to the school board, parents, staff, and other relevant persons.

[1]Adapted from Robert E. Norton, *Staff Development Guidelines and Procedures for Comprehensive Career Education*. The Center for Vocational Education, Ohio State University, Columbus, Ohio, 1975.

Self Evaluation: PL 94-142: Implications for Administrators

Questions:

1. What are some of the positive effects for an administrator who has a sound educational philosophy?
2. In addition to the regular staff, who should also be involved in the planning conference of a child?
3. Which term best describes the administrator's role in a school system or recreational agency?
   a. decision maker
   b. spokesperson
   c. educational leader
   d. all of the above
4. List four key areas an administrator should evaluate in preparation for implementing PL 94-142.

Answers:

1. a. staff support
   b. advocacy by the staff
   c. high morale among the staff
2. a. parent
   b. adaptive physical educator
   c. therapeutic recreator
3. d. all of the above
4. philosophical questions, budgetary requirements, staff development, curriculum content and approach, curriculum logistics and implementation, cultural and familial considerations, learning resources, and evaluation methods

GUIDE 8

THE ROLE OF PARENTS IN THE EDUCATION OF THEIR HANDICAPPED CHILDREN

Overview

Public Law 94-142 recognizes the value of parent input into a child's education and therefore has carefully designated policies and procedures mandating parental rights in determining the educational direction for their child. Under the law, the term "parent" refers to a:

(1) natural parent,
(2) foster parent,
(3) legal guardian, or
(4) "surrogate parent" appointed by the state when a child's parents are unknown or unavailable.

The parent may request an educational assessment of their child if they suspect a special problem exists. Although your state and local school district has a specific plan to locate handicapped children (child find), as a parent, you are the most knowledgeable of your child and, therefore, the most logical source of referral. If you suspect your child has a problem that interferes with his/her learning ability, contact the school principal and the Director of Special Education of your school district and request an evaluation of your child be conducted as soon as possible. Any delay in identifying your child's needs will delay educational programming to meet those needs, and therefore prolong the anxiety, frustration, and sense of failure your child is experiencing in his present educational program.

It is important for you, the parent, to keep a personal file of all phone conversations, letters, and meetings with school officials, to make certain both you and the school system are complying with the regulations mandated by PL 94-142. It would be helpful at this time to obtain a copy of PL 94-142 regulations, as well as your state's plan and local district's plan for complying with these regulations. Your State Department of Education and your school district should have copies of each of the above, and copies must be sent to you if you request them.

Identification, Evaluation, Placement

If school officials feel your child has a special need (through screening or teacher referral), you must receive written notification before the school may conduct any special testing of your child, or initiate any change in his/her educational placement. The written notice must tell you:

(1) the school's reasons for referring your child: what school records, screening tests or opinions indicate a need for further testing

(2) exactly what the school intends to do: which tests they intend to give, what professionals will do the testing, and what type of program or placement change they anticipate.

Remember, it is illegal for anyone to change your child's present educational program or placement without first consulting you and conducting an evaluation. If you do not consent to further special testing of your child, the school has the right to appeal to an independent hearing officer who renders the final decision of whether or not your child will undergo evaluation for special placement.

A thorough evaluation of your child should assess all domains of the child's development—physical, intellectual, social, and emotional.

The professionals selected to evaluate your child *must include people who are familiar with your child.* Evaluation team members may include any of the following:

(1) you, the parent,
(2) your family doctor,
(3) your child when appropriate,
(4) your child's teachers,
(5) a special educator familiar with the particular disability your child exhibits,
(6) the school psychologist,
(7) the principal,
(8) a representative of a private school if such a placement seems likely,
(9) a social worker, and
(10) any other professional you or the school may want to involve.

Some members of this team will later be part of the individualized educational program (IEP) team if the evaluation warrants special education services.

Make certain the tests proposed are not biased against your child. For example, if your child is deaf, it may not be permissable to give him/her an oral test. If your child does not speak English, the test must be given in the child's native tongue. A child confined to a wheelchair may not be held accountable for the AAHPER 50-yard dash. Formal testing alone, however, is not a sufficient evaluation of your child. The law states that other evaluative techniques must be utilized, such as:

(1) observations of the child both at home and in school,
(2) parent and teacher observations of the child's performance and behavior,
(3) medical examinations.

Once the evaluation has been conducted, the school must meet with you, a teacher, an administrator, a member of the evaluation team, and any other individuals you request to be present to discuss the results of the evaluation and consider if any special services are needed. Subsequently, an individualized education program (IEP) development meeting must be held within 30 days of the evaluation and special needs finding. The IEP is the written result of your child's evaluation. See the section *Individualized Education Program (IEP)* for the contents and procedures of the IEP.

Your attendance at all meetings concerning your child's education is very important. The school is required by law to attempt to schedule all meetings at a mutually convenient time and place. In the event you cannot attend a meeting, an effort must be made through phone calls, letters, and home visits to inform you of meetings and discuss the issues involved. You are still entitled to a full report of the proceedings, to conferences with school personnel, and access to all records. Again, it is important to record in your personal file the time, date, and content of all communications between you and members of the school system.

It would be to your advantage as a parent to also have someone with experience and legal expertise accompany you to the IEP meetings. This expert might be from an advocacy group or from a legal services center. In any case, this individual(s) should help ensure that procedures are correctly followed, all needed services are addressed and provided by the school and the educational program and placement is appropriate for maximizing your child's achievement. The contents of the written IEP are legally binding and must be fulfilled by the school. Therefore, make certain all services, length of services, transportation to and from all services and realistic educational goals and objectives are included in the IEP. Remember, the school is responsible only for carrying out the services described in the IEP, it is not accountable for the success or failure of your child to reach the specified goals and objectives.

If you do not understand any terminology or procedure used by school officials, ask them to clarify or further explain the word or item. Likewise, if you do

not understand because you are deaf, or have a language problem, the school system must communicate everything so that you understand it. The IEP cannot be implemented without your consent. Until an agreement is reached between the parent or the hearing officer and the school system, the child remains in his/her present educational program. However, once the agreement is reached, and the IEP is signed, the IEP must begin immediately.

Each child's IEP must be reviewed at least once a year, and you *must* be a part of the review team. A full re-evaluation with a new IEP developed must occur every three years or sooner if you or your child's teacher requests it. Therefore, if you feel the current IEP is outdated or no longer appropriate and your child's needs have changed, request school officials to review your child's program and placement in order to revise the IEP or possibly even return your child to the regular class. Throughout the life of the IEP, it is important for you to talk with your child's teachers to keep them informed of what is happening in the home as well as keeping you informed of your child's progress in the classroom.

Remember, the goal of the IEP is to determine what strategies and services will help your child most effectively and efficiently learn what he/she is ready to learn. Therefore, prepare yourself for each meeting by reviewing your child's school records, recording your own observations of your child, and familiarizing yourself with both the state and local plan.

Due Process

If you are not satisfied with any aspect of your child's evaluation or IEP, don't agree to it by signing the approval sheet. You have a right to challenge the school's decision or quality of service provided. Do not be afraid to challenge local school officials if you believe:

The evaluation was not appropriate.

Your opinions concerning your child's education were not considered or addressed in planning conferences.

The IEP developed for your child is not appropriate based on the evaluation findings.

The school is not implementing the special education services as specified in the IEP.

The school has delayed implementation of any service specified in the IEP.

Your child is not showing any progress in the educational setting or with the special services identified in the IEP.

You feel racial, cultural, or disability biases have led to the development of an inappropriate IEP for your child.

There are six legal actions you may take in challenging the school:

(1) appeal to the local school officials,
(2) request an independent evaluation,
(3) request a hearing before an independent and neutral hearing officer,
(4) file an administrative appeal,
(5) file a complaint to the Federal Office for Civil Rights,
(6) file a lawsuit.

It is always best to try to settle the issues with local officials before proceeding with any other course of action. If you are not satisfied with the results of your appeal, request your school district provide you with all the information regarding the due process procedures. Before any further steps are taken, obtain the aid of a lawyer from a community advocacy group or legal services.

Whether you choose to begin with an independent evaluation or a hearing, the following steps will help get you started:

(1) Get all the help you can from professionals and other advocate groups for handicapped children. Contact all professional organizations, special education departments from nearby colleges or universities, parent organizations, and teachers familiar with your child. Guide 12 of the manual lists names of advocates you can contact in your state for help.

(2) Assemble all your child's school records (the school must make all records available to you on request), medical records, the assessment, the IEP, and notes from all previous meetings with school personnel.

(3) Thoroughly review your school district's plan for special education services. You may reveal areas negligent in complying with federal law.

If you request that your child be re-evaluated by professionals not personally or professionally associated with the school system, obtain a list of names from the school as well as from the advocacy groups you have consulted. The independent evaluation should be conducted by professionals with similar or better credentials than the original evaluation team. The same procedures and safeguards adhere for the independent evaluation as are mandated for the initial school district assessment. Usually, the independent evaluation is provided at the public expense, however, if the school challenges your request for an independent evaluation and a hearing officer rules *for* the initial evaluation prior to the independent evaluation being conducted, then you, the parent, must pay the cost of the independent evaluation.

If your first step is to request a hearing on your

child's IEP services, send a written formal request to all school officials involved and to the State Director of Special Education (see Guide 12). Make certain you identify all the people involved in the original IEP and keep a copy of this letter in your personal file. The hearing process must be completed within 45 days of the time your letter was sent or the time the school officials requested the hearing. The school district will arrange a hearing date that is convenient to all involved and will inform you of any services available to assist you.

At the hearing, the hearing officer will listen to the evidence and viewpoints you provide concerning your child's educational program as well as to those provided by the school. It is important for you to explain why a particular program would be more beneficial for your child; therefore, make certain all experts substantiating your claims are present and involved in the hearing process.

Following is a list of your rights at the hearing:

(1) You are entitled to have anyone you wish present at and involved in the hearing process. You should make certain the independent evaluator, your lawyer, community advocate(s), and other special education professionals who share your views, are present at the hearing and present their views.

(2) You can request the presence of and question anyone involved in your child's education thus far.

(3) Your child can attend and be questioned.

(4) You can decide whether the hearing be open or closed to the public.

When the evidence from both sides has been presented, the hearing officer will decide the most appropriate placement and/or program for your child. The school must provide the services ordered by the hearing officer or must pay for your child to attend a private program which will provide those services. A written copy of the final decision must be given to you within 45 days of the date you first requested a hearing. You are also entitled to a written transcript or a tape recording of the proceedings.

If you or the school system disagree with the hearing officer's decision, you may appeal to your State Department of Education.

The State Department of Education will review the entire hearing process and render a decision within 30 days of the request. You may present additional evidence and meet with the appeals officer if so desired.

If you are still unsuccessful in getting the services you feel your child needs or if there are violations of the law within your state or school district, you can then file a complaint with the Federal Office for Civil Rights (for violation of Section 504) or with the Bureau of Education for the Handicapped (for violation of PL 94-142). A written letter stating your complaint and all the people involved thus far will initiate an investigation. Action by either of these federal agencies can cause withdrawal of federal money allotted to your State or school district due to their noncompliance with federal regulations.

Your final avenue to challenge the evaluation, placement, program or due process provided you and your child is a lawsuit. Unlike the complaint process, a lawsuit can result in a direct order to public officials to comply with all aspects of the law.

What Parents Can Do to Assure Physical Education and Recreation Compliance with the Law

As a parent, PL 94-142 has guaranteed you a powerful voice in your child's education. Your voice will often determine whether or not your child receives physical education and recreation services from qualified professionals. Although physical education is guaranteed for your child, recreation is provided for your child only if the IEP committee deems it necessary. However, neither the physical education specialist nor the recreation specialist is required to evaluate your child or assist in the IEP development. Therefore, you as the parent should settle for no less than a trained adapted physical educator evaluating and programming your child's physical education, and a trained recreation professional evaluating and programming your child's leisure activities. Working through parent pressure groups, P.T.A.'s, your State's physical education and recreation associations, and community advocacy groups, you can bring about your State or local school district's compliance with the physical education and recreation provisions of PL 94-142 by:

(1) making certain all motor assessments are conducted by trained adapted physical education specialists and all leisure assessments are conducted by trained recreation personnel,

(2) insisting *all* IEP conferences address the necessity of providing specially designed physical education instruction and therapeutic recreation,

(3) insisting, when necessary, that physical education and/or recreation goals and objectives are developed for the IEP by specially trained physical education and recreation personnel,

(4) making certain all specially designed physical education and/or recreation services identified in the IEP are implemented by trained physical education and/or recreation personnel,

(5) procuring funds so that special equipment and resources to adapt activities are available in your school so a handicapped child will not needlessly be denied participation,

(6) insisting equal funds be spent for training and retraining physical educators and recreators as are spent for other curricular areas,

(7) insisting that qualified physical education and recreation representatives be appointed to your State's Advisory Panel. This Panel advises your State Education Agency on unmet needs within the State, publicly comments on the proposed rules and regulations regarding the education of handicapped children and the procedures for distributing funds, and finally, assists your State in reporting data and evaluations as needed by the U.S. Commissioner, and

(8) noting what recreational, intramural, and interscholastic activities are provided for non-handicapped children in your school district, and ensuring these same activities are available to your child.

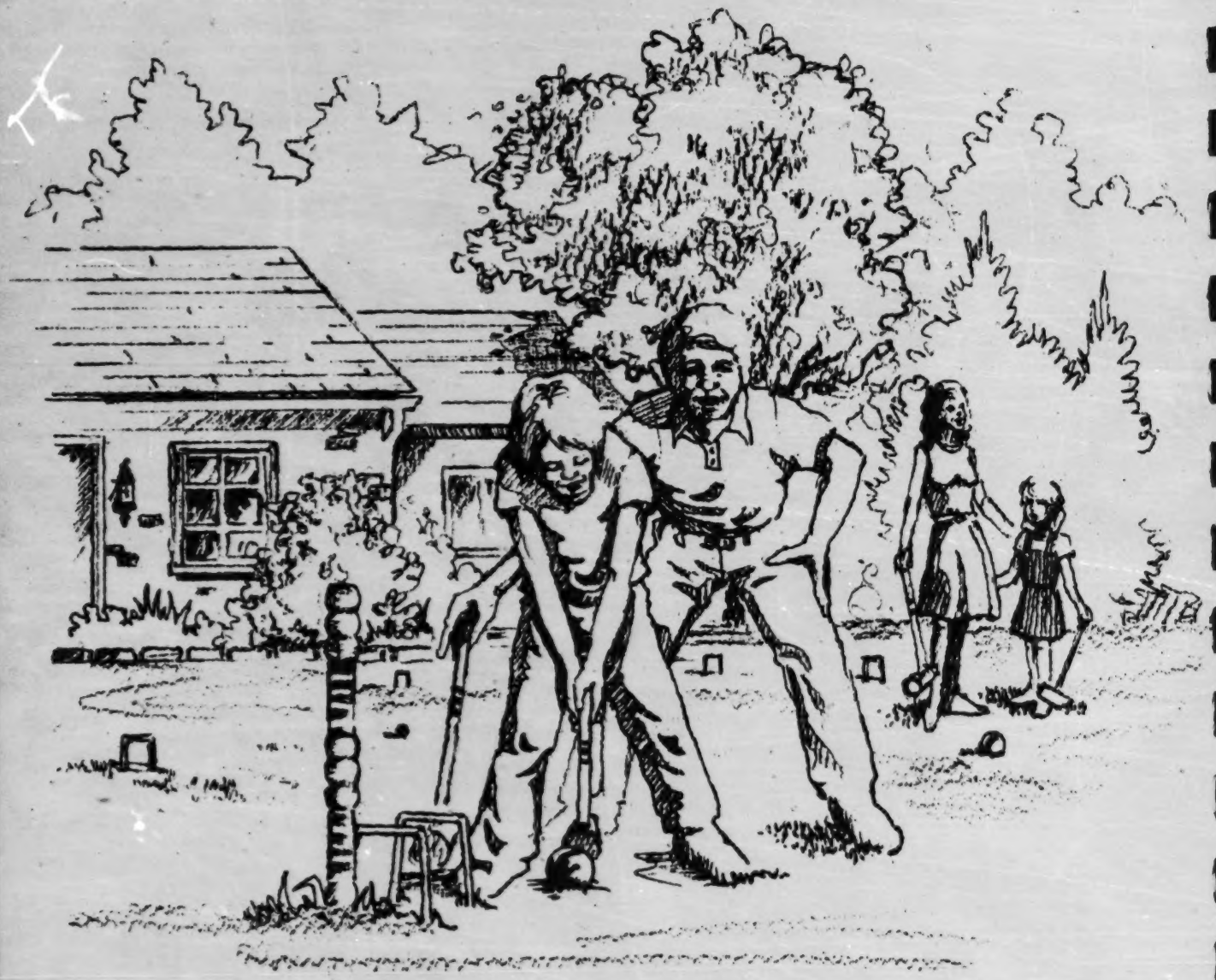
Self Evaluation: Implications for Parents

Questions:

1. What should a parent or legal guardian do if he/she suspects that his/her child has a problem which interferes with learning ability?
2. In addition to you as a parent and your child, list at least three of the possible members of the team which will evaluate the child prior to placement in special education programs.
3. If a parent wishes to have someone with experience and legal expertise accompany him/her to the IEP meetings, where could the parent find such individuals?
4. In your own words, give at least two reasons that a parent may challenge local school officials regarding a child's IEP.
5. How can parents work to insure that school districts are in compliance with physical education and recreation provisions of PL 94-142?

Answers:

1. • Contact the school principal and Director of Special Education of his/her school district and request an evaluation of the child.
2. • family doctor
   • child's teachers
   • special educator familiar with the particular disability exhibited by the child
   • the school psychologist
   • the principal
   • a representative from a private school
   • a social worker
3. • an advocacy group
   • legal services center
4. • The evaluation was not appropriate.
   • Your opinions concerning your child's education were not considered or addressed in planning conferences.
   • The IEP developed for your child is not appropriate based on the evaluation findings.
   • The school is not implementing the special education services as specified in the IEP.
   • The school has delayed implementation of any service specified in the IEP.
   • Your child is not showing any progress in the education setting or with the special services identified in the IEP.
   • You feel racial, cultural, or disability biases have led to the development of an inappropriate IEP for your child.
5. • Work through parent pressure groups, PTA's, state physical education and recreation associations and community advocacy groups to insure that physical education and recreation opportunities are equal for all children, regardless of any handicapping conditions.



GUIDE 9

DEVELOPING A COMPREHENSIVE INDIVIDUALIZED PHYSICAL EDUCATION PROGRAM

Planning an individualized physical education program in the least restrictive environment requires the establishment of a comprehensive physical education program and program planning system. A comprehensive physical education program will contain all content areas included in the PL 94-142 definition of physical education:

- physical fitness
- motor fitness/skills
- aquatics
- dance
- individual and group games
- individual, dual, and team sports.

Assessment, programming, and evaluation in physical education should address all the content areas.

Following is a step-by-step instructional guide designed to assist the physical education specialist in developing:

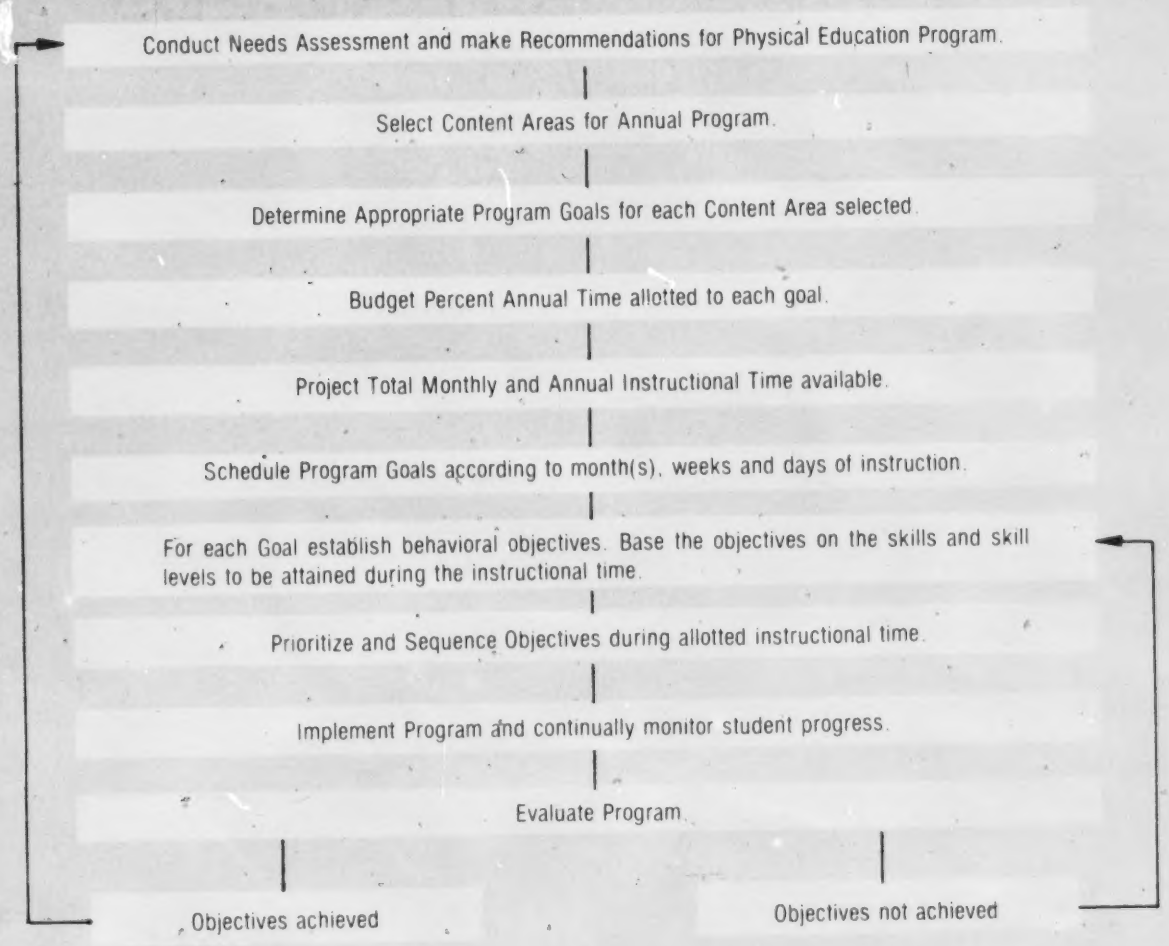
(1) a comprehensive physical education program plan

(2) an individualized physical education program in accordance with the comprehensive program plan.

The system can be used in developing an IEP for a class of students or for an individual student. Throughout development, implementation, and evaluation, the program must remain flexible enough to amend, delete, or alter inappropriate goals, objectives, or tasks, and to increase or decrease instructional time where necessary.

The system model presented is designed to help the teacher approach curriculum and program development in a systematic yet highly individualized manner in order to offer handicapped children a comprehensive physical education program designed to meet their needs and abilities, and to comply with regulations of PL 94-142.

Systems Model for IEP Development


Conduct Needs Assessment and make Recommendations for Physical Education Program.
Select Content Areas for Annual Program.
Determine Appropriate Program Goals for each Content Area selected.
Budget Percent Annual Time allotted to each goal.
Project Total Monthly and Annual Instructional Time available.
Schedule Program Goals according to month(s), weeks and days of instruction.
For each Goal establish behavioral objectives. Base the objectives on the skills and skill levels to be attained during the instructional time.
Prioritize and Sequence Objectives during allotted instructional time.
Implement Program and continually monitor student progress.
Evaluate Program.
Objectives achieved
Objectives not achieved

Step 1: Needs Assessment

Conduct a general needs assessment on the eight physical education content areas as identified in PL 94-142:

- Physical Fitness
  - Strength
  - Flexibility
  - Endurance
  - Relaxation
- Motor Fitness/Skills
  - Static Posture
  - Dynamic Posture
  - Locomotor Skills
  - Body Awareness
  - Body Control
  - Object Manipulation
- Aquatics
  - Survival Skills
  - Strokes
  - Kicks
- Dance
  - Folk
  - Social
  - Square
  - Disco
- Individual Games
- Group Games
- Individual Sports
- Dual and Team Sports.

The needs assessment will range from normative tests designed to measure physical fitness, and motor skill levels, to observation techniques in assessing one's

ability to play basketball, to surveying parents and aides of the learner's abilities in a particular content area. This assessment should be conducted within the initial weeks of class and should not be so extensive as to require more than three weeks for assessment.

The physical education specialist subsequently makes recommendations for physical education programming based on the results of the needs assessment. These recommendations will assist the IEP committee in developing an individualized program for a particular child or will assist the physical education teacher in programming for a particular class. Record performance results of the NEEDS ASSESSMENT on the IEP.

IEP

Physical Education

Needs Assessment

Content Areas: Physical Fitness
Motor Fitness/Skills
Aquatics
Dance
Individual Games
Group Games
Individual/Dual Sports
Team Sports

School District: Fegan High
Student/Class: Sally Sport Age 13
Teacher: Spike Ball
Assessment Date: 9/1/79
IEP Date: 10/1/79

Content Area (Include all of above)	Assessment Method	Present Level of Performance	Recommendations (Include extent of regular class participation)
Physical Fitness	Kennedy-AAHPER Special Fitness Test Iowa Posture Test	Arm hang (5 sec.) poor Softball throw (30 feet) poor Sit-ups (25) good Shuttle run (12.1 sec.) good 50 yd. dash (7.9) excellent 300 yd. run-walk (1:56) poor Standing broad jump (5'5") good	Interval training program to develop arm strength and endurance. Participate in highly active games and sports.
Motor Fitness/Skills	Observations Bruininks Oseretsky	Static posture good Dynamic posture: toes out while walking and running, slight lordosis Locomotor skills good Coordination good	Yoga exercises during interval training program. Balance beam walking emphasizing proper foot alignment.

Step 2: Annual Content Areas

Based on the needs assessment, determine which of the eight content areas will be included in your annual program plan and record the selected content areas on the IEP ANNUAL PROGRAM FORM.

IEP

Physical Education

Annual Program

School District: Fegan High
Student: Sally Sport
Teacher: Spike Ball

Time in P.E.: 3 days/week
50 min./day
Assessment Date: 9/1/79
IEP Date: 10/1/79

Content Area	Annual Goal	Short-Term Objective	Techniques and/or Materials	Total Inst. Time in Min.	Duration Dates Beg.	Duration Dates End	Date Object. Achieved
Physical fitness							
Dance							
Individual sports							
Team sports							

Step 3: Annual Program Goals

Determine annual program goals based on the needs assessment and the selected content areas. Goal statements should be based on the assessed needs and abilities of participants given their age, interests, and limitations. Record selected goals on the following forms:

(1) ANNUAL GOALS AND OBJECTIVES
(2) ANNUAL PROGRAM PLAN
(3) PROGRAM PLAN EVALUATION
(4) THE IEP.

Annual Goals and Objectives

Long-Term Goals	Short-Term Behavioral Objectives by Ability Level		
	Beginner	Intermediate	Advanced
Perform selected disco and social dances			
Participate in regulation or modified game of soccer			

Annual Program Plan

Instructor: Spike Ball
Ability Level: Beginner

	% Inst. Time	Total Inst. Time in Min.	Inst. Time per Goal
Goal: Develop functional level of cardiorespiratory endurance to enable participation in high active sports	10%	×	=
Goal: Develop functional level of arm strength to enable participation in weekend canoe trip	10%	×	=
Goal: Improve dynamic posture	10%	×	=
Goal: Participate in a game of line soccer	10%	×	=
Goal: Develop functional swimming crawl stroke	10%	×	=
Goal: Participate in modified game of volleyball	10%	×	=
Goal: Participate in Special Olympics-track and field events	20%	×	=
Goal: Perform selected disco and social dances	10%	×	=
Goal: Participate in regulation game of "Tennis Twosome"	10%	×	=
Goal:	100%	Total Inst. Time	

Program Plan Evaluation

Instructor: Spike Ball
Ability Level: Beginner

Goal: The student will acquire basic fundamental skills, appropriate social behavior, and functional knowledge of rules to enable him to successfully participate in a game of line soccer.

Projected Inst. Time: 356 minutes

Behavioral Objectives	Prog. Inst. Time	Actual Inst. Time	Obj. Achieved (yes/no)	Comments
1.				
2.				
3.				
4.				
5.				
6.				

IEP
Physical Education
Annual Program

School District: Fegan High
Student: Sally Sport
Teacher: Spike Ball

Time in P.E.: 3 days/week
50 min./day
Assessment Date: 9/1/79
IEP Date: 10/1/79.

Content Area	Annual Goal	Short-Term Objective	Techniques and/or Materials	Total Inst. Time in Min.	Duration Dates		Date Object. Achieved
					Beg.	End	
Physical fitness	Develop functional level of cardiorespiratory endurance to enable participation in high active sports Develop functional level of arm strength to enable participation in weekend canoe trip						

Step 4: Budget Time

Decide what percent of your total annual time will be allotted to each goal. This decision of percent time should be based on the priority of the respective content area and the difficulty of the subject matter. The total sum of all program goals may not exceed 100%. Record the percent time allotted each goal in the first column of the ANNUAL PROGRAM PLAN (% Inst. Time).

Annual Program Plan

Instructor: Spike Ball
Ability Level: Beginner

	% Inst. Time		Total Inst. Time in Min.		Inst. Time per Goal
Goal: Develop functional level of cardiorespiratory endurance to enable participation in high active sports	10%	×	3560	=	356
Goal: Develop functional level of arm strength to enable participation in weekend canoe trip	10%	×	3560	=	356
Goal: Improve dynamic posture	10%	×	3560	=	356
Goal: Participate in a game of line soccer	10%	×	3560	=	356
Goal: Develop functional swimming crawl stroke	10%	×	3560	=	356
Goal: Participate in modified game of volleyball	10%	×	3560	=	356
Goal: Participate in Special Olympics track and field events	20%	×	3560	=	712
Goal: Perform selected disco and social dances	10%	×	3560	=	356
Goal: Participate in regulation game of "Tennis Twosome"	10%	×	3560	=	356
Goal:	100%		Total Inst. Time		3560

Step 5: Projected Annual Instructional Time

On the MONTHLY PLAN FORM:

(a) "X" all days when physical education will *not* be held as scheduled (e.g., holidays, parties, field trips, half days, etc.). (Noted in Red.)

(b) Determine total instructional time per day. Do not include time for showering, dressing, roll call, setting up equipment, etc. (Noted in Blue.)

(c) Total the weekly instructional time by summing daily times across the week. (Noted in Green.)

(d) Total monthly instructional time by summing the weekly time column. (Noted in Bold Type.)

Monthly Program Plan

Month: December
Teacher: Spike Ball
Ability Level: Beginner

Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Inst. Time
5		7		9	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	120
12		14		16	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	120
19		21		23	
				Assembly	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 20	100
Christmas Holiday		Christmas Holiday		Christmas Holiday	
Daily Inst. Time:	Daily Inst. Time	Daily Inst. Time:	Daily Inst. Time	Daily Inst. Time:	000
				Monthly Inst. Time:	**340**

In the second column of the ANNUAL PROGRAM PLAN (Total Inst. Time in Min.), determine the annual instruction time by summing all the monthly instructional times.

Annual Program Plan

Instructor: Spike Ball
Ability Level: Beginner

	% Inst. Time		Total Inst. Time in Min.		Inst. Time per Goal
Goal: Develop functional level of cardiorespiratory endurance to enable participation in high active sports	10%	×	3560	=	
Goal: Develop functional level of arm strength to enable participation in weekend canoe trip	10%	×	3560	=	
Goal: Improve dynamic posture	10%	×	3560	=	
Goal: Participate in a game of line soccer	10%	×	3560	=	
Goal: Develop functional swimming crawl stroke	10%	×	3560	=	
Goal: Participate in modified game of volleyball	10%	×	3560	=	
Goal: Participate in Special Olympics track and field events	20%	×	3560	=	
Goal: Perform selected disco and social dances	10%	×	3560	=	
Goal: Participate in regulation game of "Tennis Twosome"	10%	×	3560	=	
Goal:	100%		Total Inst. Time		

Step 6: Schedule Time

On ANNUAL PROGRAM PLAN FORM, determine the proportions of annual instructional time to be spent on each goal by multiplying annual time by percent time allotted to each goal.

Annual Program Plan

Instructor: Spike Ball
Ability Level: Beginner

Goal	% Inst. Time		Total Inst. Time in Min.	Inst. Time per Goal
Develop functional level of cardiorespiratory endurance to enable participation in high active sports	10%	×	3560	356
Develop functional level of arm strength to enable participation in weekend canoe trip	10%	×	3560	356
Improve dynamic posture	10%	×	3560	356
Participate in a game of line soccer	10%	×	3560	356
Develop functional swimming crawl stroke	10%	×	3560	356
Participate in modified game of volleyball	10%	×	3560	356
Participate in Special Olympics track and field events	20%	×	3560	712
Perform selected disco and social dances	10%	×	3560	356
Participate in regulation game of "Tennis Twosome"	10%	×	3560	356
Goal:	100%		Total Inst. Time	3560

On the MONTHLY PLAN FORM, determine the specific month(s), weeks, and days the goal will be implemented based on the determined goal instructional time. Record the Duration Dates on the IEP ANNUAL PROGRAM PLAN.

IEP

Monthly Program Plan

Month: November
Teacher: Spike Ball
Ability Level: Beginner

Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Inst. Time
1 Soccer		3 Soccer		5 Soccer Assembly	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 20	100
8 Soccer		10 Soccer		12 Soccer	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	120
15 Soccer		17 Soccer		19 Soccer Assembly	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 20	100
22 Soccer		24 Play Day Thanksgiving Assembly		26 Thanksgiving Vacation	
Daily Inst. Time: 40	Daily Inst. Time	Daily Inst. Time: 20	Daily Inst. Time	Daily Inst. Time:	60
				Monthly Inst. Time:	380

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IEP

Monthly Program Plan

Month: December
Teacher: Spike Ball
Ability Level: Beginner

Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Inst. Time
5 Volleyball		7 Volleyball		9 Volleyball	
Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 40	120
12 Volleyball		14 Volleyball		16 Volleyball	
Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 40	120
19 Volleyball		21 Volleyball		23 Volleyball Assembly	
Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 40	Daily Inst. Time:	Daily Inst. Time: 20	100
Christmas Holiday		Christmas Holiday		Christmas Holiday	
Daily Inst. Time:	Daily Inst. Time:	Daily Inst. Time:	Daily Inst. Time:	Daily Inst. Time:	000
				Monthly Inst. Time:	340

Step 7: Select Appropriate Behavioral Objectives

Each long term goal can generate many behavioral objectives. The criteria of these objectives will depend on the skills you want the student to master and/or how well they should be performed (level of difficulty). On the ANNUAL GOALS AND OBJECTIVES FORM, list those skills and skill levels appropriate for each ability level. This list should be based on the following factors:

- Age of Participant(s)
- Past Experience of Participant(s)
- Limitations of Participant(s)
- Knowledge of Learning and Development Rate of Participant(s)
- Relationships Among Skills and Skill Levels.

Keep in mind that objectives and skills are not absolute entities but are highly interrelated and dependent. For example, a student must have sufficient endurance to participate in a regulation soccer game; certain fundamental skills and rules must be mastered before students can play line soccer. Therefore, determining the behavioral skills and skill levels per goal to be mastered by each ability group requires thoughtful, progressive and sequential planning. These behavioral skills will serve to individualize instruction for classes of students with similar physical abilities, as well as for a class of students that must be re-grouped according to ability level.

On the PROGRAM PLAN EVALUATION FORM and the IEP ANNUAL PROGRAM FORM, write behavioral objectives based on the appropriate skills and skill levels identified for that ability level. It is important to note that a goal for one person may be a short term instructional objective for another person.

Annual Goals and Objectives

Long-Term Goals	Short-Term Behavioral Objectives by Ability Level		
	Beginner	**Intermediate**	**Advanced**
Perform selected disco and social dances	Line dances alley cat bunny hop hora bus stop Waltz basic Hustle basic inside turn outside turn	Waltz hesitation step box step box turn Latin hustle basic inside turn outside turn Swing basic inside & outside turns wrap	Waltz pivot turn Fox trot basic box step and turn dip Cha cha basic Swing collegiate brush off Latin hustle dip combination
Participate in regulation or modified game of soccer	Skills dribbling passing trapping instep shot front tackle Scoring Rules handling, throw-in, tripping holding, pushing, kick-off Attire Equipment Facility	Skills volley shot punting chest trap Goalkeeping catching punching Soccer Positioning Rules charging, obstructing hook tackle juggling	Skills heading offensive plays defensive plays diving Rules goal kick corner kick

Program Plan Evaluation

Instructor: Spike Ball
Ability Level: Beginner

Goal: The student will acquire basic fundamental skills, appropriate social behavior, and functional knowledge of rules to enable him to successfully participate in a game of line soccer.

Projected Inst. Time: 356 minutes

Behavioral Objectives	Prog. Inst. Time	Actual Inst. Time	Obj. Achieved (yes/no)	Comments
1. Given a variety of clothing, the student will select and wear the appropriate clothes for participation in a game of soccer.				
2. Given a variety of sports equipment, the student will be able to select the appropriate soccer equipment necessary for play.				
3. Before each game, the student will be able to prepare the field for play.				
4. Given demonstration and practice, the student will successfully execute the following skills in a game of line soccer:				
5. The student will dribble a ball 20 meters two out of three times.				
6. The student will pass a soccer ball from a dribble to a moving teammate at a distance of 5 meters two out of three times.				
7. The student will trap a soccer ball rolled from a distance of 5 meters using the side of the foot two out of three times.				
8. The student will punt the soccer ball for a distance of 20 meters to a teammate two out of three times.				
9. The student will score a goal from a dribble at a distance of 10 meters two out of three times.				
10.				
11.				
12.				

Step 8: Schedule Objectives

Project the time required to master each objective in the first column (Prog. Inst. Time) of the PROGRAM PLAN EVALUATION FORM. Record this time on the IEP ANNUAL PROGRAM FORM (Total Inst. Time in Min.) also.

Program Plan Evaluation

Instructor: Spike Ball
Ability Level: Beginner

Goal: The student will acquire basic fundamental skills, appropriate social behavior, and functional knowledge of rules to enable him to successfully participate in a game of line soccer.

Projected Inst. Time: 356 minutes

Behavioral Objectives	Prog. Inst. Time	Actual Inst. Time	Obj. Achieved (yes/no)	Comments
1. Given a variety of clothing, the student will select and wear the appropriate clothes for participation in a game of soccer.	15			
2. Given a variety of sports equipment, the student will be able to select the appropriate soccer equipment necessary for play.	26			
3. Before each game, the student will be able to prepare the field for play.	15			
4. Given demonstration and practice, the student will successfully execute the following skills in a game of line soccer:	200			
5. The student will dribble a ball 20 meters two out of three times.	40			
6. The student will pass a soccer ball from a dribble to a moving teammate at a distance of 5 meters two out of three times.	40			
7. The student will trap a soccer ball rolled from a distance of 5 meters using the side of the foot two out of three times.	40			
8. The student will punt the soccer ball for a distance of 20 meters to a teammate two out of three times.	40			
9. The student will score a goal from a dribble at a distance of 10 meters two out of three times.	40			
10.				
11.				
12.				

On the MONTHLY PLAN FORM, fit the behavioral objectives to the structural time in a sequential progressive teaching schedule.

Monthly Program Plan

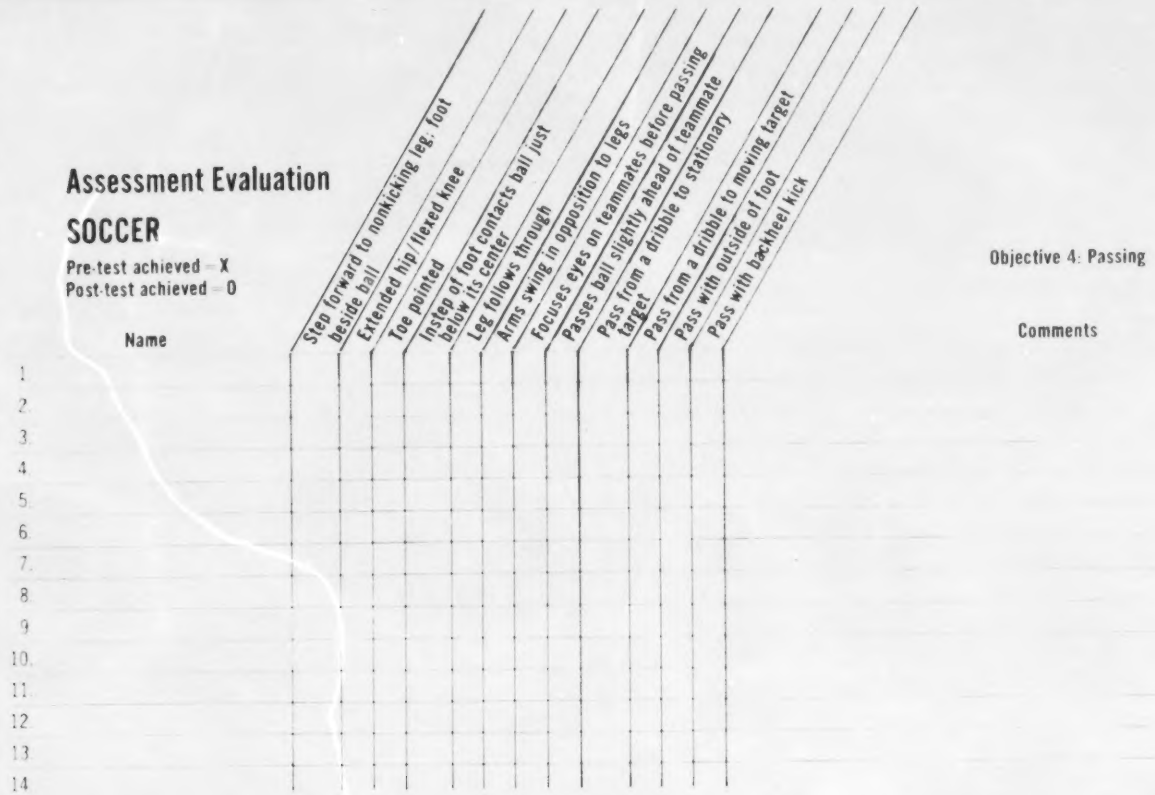
Month: November
Teacher: Spike Hall
Ability
Level: Beginner

Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Inst. Time
1 Soccer-Introduce Clothing 5 Equipment 10 Prep. field 5 Dribble 10 Pass 10		3 Soccer Clothing 5 Equipment 5 Prep. field 5 Dribble 8 Pass 7 Trap 10		5 Soccer Prep. field 5 Dribble 7 Pass 8 Assembly	
Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 20	100
8 Soccer Clothing 2 Equipment 3 Pass 7 Trap 8 Instep shot 10 Handling, holding tripping 10		10 Soccer Pass 5 Trap 5 Instep shot 10 Hand.. hold.. trip. 5 Kickoff 5 Goalkeeping 10		12 Soccer Dribble & pass 5 Front tackle 10 Instep shot/ kickoff 5 Obstructing, charging 10 Goalkeeping 10	
Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 40	120
15 Soccer Equipment 4 Front tackle 16 Dribble & Shoot 10 Rules & Violations 5 Goalkeeping 5		17 Soccer Scoring 5 Line soccer 35		19 Soccer Scoring 5 Line soccer 15 Assembly	
Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 20	100
22 Soccer Clothing 3 Equipment 4 Line soccer 33		24 Play Day Thanksgiving Assembly		26 Thanksgiving Vacation	
Daily Inst. Time 40	Daily Inst. Time	Daily Inst. Time 20	Daily Inst. Time	Daily Inst. Time	60
				Monthly Inst.	380

Step 9: Implement the Program

Continuous evaluation of student progress or changes of behavior provides the information needed to make appropriate instructional decisions and changes. Continuous evaluation also permits you to communicate with parents, other school personnel, and students regarding the appropriateness of the IEP.

Although you should attempt to follow your instructional plan as closely as possible, you must remain flexible and open to necessary changes. Your projected instructional times will not be exact: some may take half the projected time for mastery while others will need three times what you've projected. Continuous student evaluation throughout instruction will necessitate amending, adding, or deleting inappropriate goals and objectives.



Step 10: Program Plan Evaluation

On the PROGRAM PLAN EVALUATION FORM and the IEP ANNUAL PROGRAM FORM, list planned goals, behavioral objectives, and projected instructional time. Throughout instruction, note the actual time in minutes spent on each objective, whether it was achieved or not, and any additional comments (e.g., need more or less instructional time, unobtainable by group, criteria inappropriate for group, etc.).

Your program plan evaluation will be vital in further program planning for the class or individual and improving instruction for similar classes or individuals.

Program Plan Evaluation

Instructor: Spike Ball
Ability
Level: Beginner

Goal: The student will acquire basic fundamental skills, appropriate social behavior, and functional knowledge of rules to enable him to successfully participate in a game of line soccer.

Projected Inst. Time: 356 minutes

Behavioral Objectives	Prog. Inst. Time	Actual Inst. Time	Obj. Achieved (yes/no)	Comments
1. Given a variety of clothing, the student will select and wear the appropriate clothes for participation in a game of soccer.	15	10	yes	
2. Given a variety of sports equipment, the student will be able to select the appropriate soccer equipment necessary for play.	26	15	yes	
3. Before each game, the student will be able to prepare the field for play.	15	15	yes	
4. Given demonstration and practice, the student will successfully execute the following skills in a game of line soccer:	200	180	no	Not able to utilize skills in game situation
5. The student will dribble a ball 20 meters two out of three times.	40			
6. The student will pass a soccer ball from a dribble to a moving teammate at a distance of 5 meters two out of three times.	40			
7. The student will trap a soccer ball rolled from a distance of 5 meters using the side of the foot two out of three times.	40			
8. The student will punt the soccer ball for a distance of 20 meters to a teammate two out of three times.	40			
9. The student will score a goal from a dribble at a distance of 10 meters two out of three times.	40			
10.				
11.				
12.				

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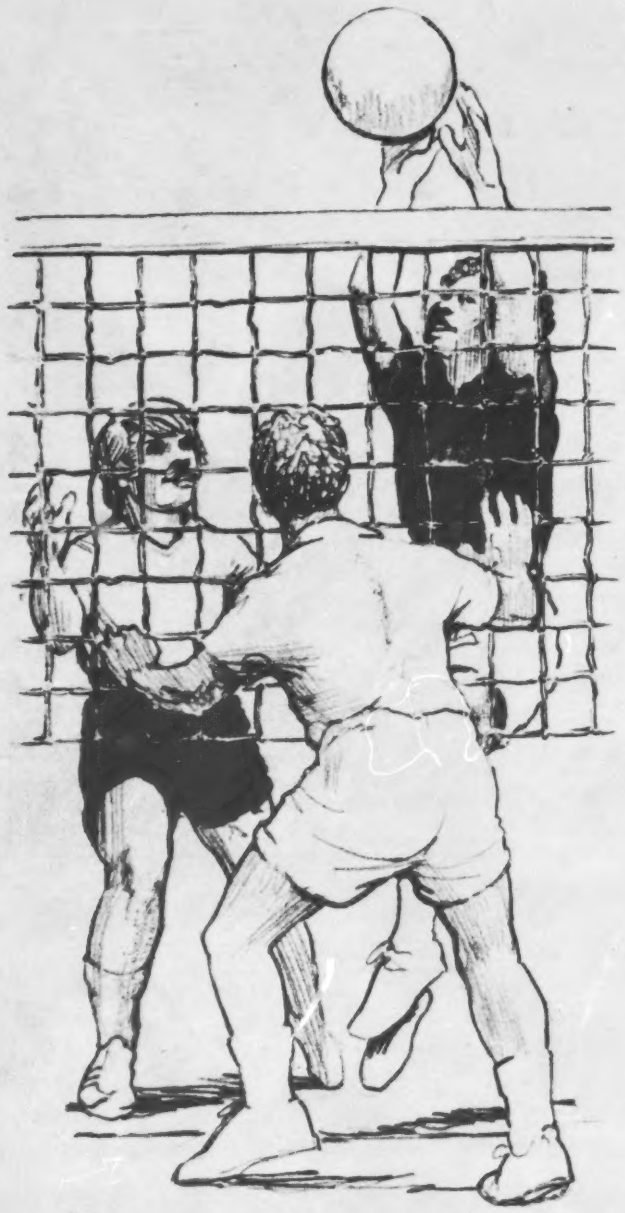
RESOURCE GUIDE



This particular guide was designed to serve as a packet of supplementary information for the users of this manual. This should provide you with enough information for both planning a workshop and also implementing services to handicapped children.

This guide has been divided into three sections:

A. AVAILABLE SOURCES identifies resources, both persons and agencies, who offer information and available services;

B. REFERENCES contains legal citations and explanation of Public Law 94-142 as well as a glossary of terms;

C. The IMPLEMENTATION FORMS are spirit masters which you may choose to incorporate into the planning of your physical education, recreation or Special Olympics program.

Available Sources

The following local, state, and national organizations should be useful in obtaining appropriate education programs for handicapped children. These lists are by no means complete. There are undoubtedly many other advocacy and information resource groups that can provide similar technical assistance and services. It's a good idea first to consult with groups with whom you normally work—such as Headstart, Legal Services, your church, local Special Olympics program, etc.—and then move on to the organizations listed here for additional assistance.

Other valuable resources are the state and local guides to specific education programs and procedures. More and more states are producing free brochures and manuals to let parents and professionals in the state know exactly what their rights are and how to work their way through the special education process. Your State Special Education Department should be able to send you copies or direct you to organizations that can. It's helpful to enclose a stamped, self-addressed envelope with your request.

If no one in your state has produced a guide to educational rights, your State Department of Education might be willing to provide the money to a parent or advocacy group to do it. Consider taking on the job. It's one of the most useful services a group could perform for the parents and professionals.

National and Regional Offices of Federal Agencies

Office for Civil Rights
National Office:
Director, Office for Civil Rights
Department of Health, Education and Welfare
330 Independence Avenue, S.W.
Washington, D.C. 20201

Bureau of Education for the Handicapped
400 Maryland Avenue, S.W.
Donohoe Building
Washington, D.C. 20202

Region I:
Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont
HEW
Office for Civil Rights
140 Federal Street
14th Floor
Boston, MA 02110

Region II:
New York, New Jersey, Puerto Rico, Virgin Islands
HEW
Office for Civil Rights
Federal Building
26 Federal Plaza
Room 3908
New York, NY 10007

Region III:
Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia
HEW
Office for Civil Rights
P.O. Box 13716
3535 Market Street
Philadelphia, PA 19101

Region IV:
Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee
HEW
Office for Civil Rights
101 Marietta Street
Atlanta, GA 30323

Region V:
Illinois, Indiana
Minnesota, Michigan
Ohio, Wisconsin
HEW
Office for Civil Rights
300 South Wacker Drive
8th Floor
Chicago, IL 60606

Region VI:
Arkansas, Louisiana, New Mexico, Oklahoma, Texas
HEW
Office for Civil Rights
1200 Main Tower Building, 19th Floor
Dallas, TX 75202

Region VII:
Iowa, Kansas, Missouri, Nebraska
HEW
Office for Civil Rights
12 Grand Building
1150 Grand Avenue
Kansas City, MO 64106

Region VIII:
Colorado, Montana
North Dakota, South Dakota, Utah, Wyoming
HEW
Office for Civil Rights
Federal Building
1961 Stout Street
Room 11037
Denver, CO 80294

Region IX:
Arizona, California, Hawaii, Nevada, Guam, American Samoa, Trust Territory of Pacific Islands, Wake Island
HEW
Office for Civil Rights
100 Van Ness, 14th Fl.
San Francisco, CA 94102

Region X:
Alaska, Idaho, Oregon, Washington
HEW
Office for Civil Rights
1321 Second Avenue
Room 5041, M/S 508
Seattle, WA 98101

National Organizations for the Handicapped

All Disabilities
American Alliance for for Health, Physical Education, Recreation, and Dance
1900 Association Drive
Reston, VA 22091

American Coalition of Citizens with Disabilities
1346 Connecticut Avenue, N.W.
Suite 1124
Washington, D.C. 20036

National Recreation and Parks Association
1601 N. Kent St.
Arlington, VA 22209

Autism
National Society for Autistic Children
169 Tampa Avenue
Albany, New York 12208

Blind
American Council for the Blind
1211 Connecticut Avenue, N.W.
Washington, D.C. 20006

American Foundation for the Blind
15 West 16th Street
New York, New York 10011

National Federation of the Blind
1346 Connecticut Avenue, N.W.
Suite 212, Dupont Circle Building
Washington, D.C. 20036

Cerebral Palsy
National Association of Sports for Cerebral Palsy
P.O. Box 3874
Amity Station
New Haven, Connecticut 06525

United Cerebral Palsy Association
66 East 34th Street
New York, New York 10016

Deaf
Alexander Graham Bell Association for the Deaf
3416 Volta Place, N.W.
Washington, D.C. 20007

National Association of the Deaf
814 Thayer Avenue
Silver Spring, Maryland 20910

Deaf-Blind
National Association for the Deaf-Blind
2703 Forest Oak Circle
Norman, Oklahoma 73071

Emotionally Disturbed
Mental Health Association, National Headquarters
1800 North Kent Street
Arlington, Virginia 22209

Epilepsy
Epilepsy Foundation of America
1828 L Street, N.W.
Suite 405
Washington, D.C. 20036

Learning Disabilities
National Association for Children with Learning Disabilities
4156 Library Road
Pittsburgh, Pennsylvania 15234

Mental Retardation
Joseph P. Kennedy, Jr. Foundation
1701 K Street, N.W.
Suite 205
Washington, D.C. 20006

National Association for Down's Syndrome
P.O. Box 63
Oak Park, Illinois 60303

National Association for Retarded Citizens
2709 Avenue E East
P.O. Box 6109
Arlington, Texas 76011

National Down's Syndrome Congress
528 Ashland Avenue
River Forest, Illinois 60305

Special Olympics, Inc.
1701 K Street, N.W.
Suite 203
Washington, D.C. 20006

Physically Handicapped
National Easter Seal Society for Crippled Children and Adults
2023 W. Ogden Avenue
Chicago, Illinois 60612

National Paraplegia Foundation
333 North Michigan Avenue
Chicago, Illinois 60601

National Wheelchair Athletic Association
40-24 62nd Avenue
Woodside, New York 11377

Spina Bifida Association of America
343 South Dearborn Street, Room 319
Chicago, Illinois 60604

Speech Impaired
American Speech and Hearing Association
10801 Rockville Pike
Rockville, Maryland 20852

National Advocacy and Service Organizations

Center for Law and Education
Guttman Library
6 Appian Way
Cambridge, MA 02138
617/495-4666

Center on Human Policy
216 Ostrom Avenue
Syracuse, NY 13210
315/423-3851

Children's Defense Fund
1520 New Hampshire Avenue, N.W.
Washington, D.C. 20036
202/483-1470

Closer Look Information Center for the Handicapped
P.O. Box 1492
Washington, D.C. 20013

Council for Exceptional Children
1920 Association Drive
Reston, VA 22091
703/620-3660

Mental Health Law Project
1220 Nineteenth Street, N.W.
Washington, D.C. 20036
202/467-5730

Mexican-American Legal Defense Fund
28 Geary Street
San Francisco, CA 94108
415/981-5800

National Association for the Deaf, Legal Defense Fund
Florida Avenue & 7th Street, N.E.
Suite 311
Washington, D.C. 20002
202/447-0503

National Center for Law and the Handicapped
1235 N. Eddy Street
South Bend, IN 46617
219/288-4751

National Juvenile Law Center
St. Louis University School of Law
3701 Lindell Boulevard
St. Louis, MO 63108
314/533-8868

Native American Rights Fund
1506 Broadway
Boulder, CO 80302
303/447-8760

Youth Law Center
693 Mission Street
Second Floor
San Francisco, CA 94105

RESOURCES

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Alabama	Alabama Special Olympics 11 S. Union St., Room 744 Highway Building Montgomery, AL 36130 205/832-5686	Alabama Developmental Disabilities Advocacy Project 918 Fourth Avenue Tuscaloosa, AL 35401 205/348-4928 Alabama Council on Human Relations P.O. Box 1632 Auburn, AL 36830 205/821-8336	Exceptional Children and Youth State Department of Education Montgomery, AL 36104
Alaska	Alaska Special Olympics SRA-Box 1444 Anchorage, AK 99502 907/344-6883	Protection and Advocacy for Developmental Disabilities, Inc. 600 University Avenue Fairbanks, AK 99701 907/479-6940	Division of Educational Program Support State Department of Education Pouch F Juneau, AK 99801
Arizona	Arizona Special Olympics 2121 S. Mill Ave., #210 Tempe, AZ 85282 602/967-4762	Arizona Center for Law 112 N. 5th Avenue P.O. Box 2783 Phoenix, AZ 85002 602/252-4904 Legal Services for the Developmentally Disabled Arizona ARC 5610 S. Central Avenue Phoenix, AZ 85040 Central Arizona Regional Epilepsy Society P.O. Box 33638 Phoenix, AZ 85607	Department of Special Education 1535 W. Jefferson Phoenix, AZ 85007
Arkansas	Arkansas Special Olympics Fausett Bldg., #202 Market & University Sts. Little Rock, AR 72205 501/666-0246	Arkansas Developmental Disabilities Advocacy System Governor's Office Capitol Building Room 011 Little Rock, AR 72201 501/371-2171	Division of Instructional Services Arch Ford Education Building Little Rock, AR 72201

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
California	California Special Olympics 1424 Fourth Street Santa Monica, CA 90401 213/393-1414 (7536)	Youth Law Center 693 Mission Street San Francisco, CA 94105 415/495-6420 Public Advocates, Inc. 1535 Mission Street San Francisco, CA 94103 415/431-7430 Disabled Paralegal Advocate Program Center for Independent Living 2539 Telegraph Avenue Berkeley, CA 94704 415/841-4776 Legal Aid Foundation of Los Angeles 1550 West Eighth Street Los Angeles, CA 90017 Western Center for Law 849 S. Broadway, Suite 206 Los Angeles, CA 90014 Protection and Advocacy Panel 150 Grand Avenue Oakland, CA 94612 Sonoma County Citizens Advocacy, Inc. P.O. Box 4449 Santa Rosa, CA 95402	Office of Special Education State Department of Education Sacramento, CA 95814
Colorado	Colorado Special Olympics 3824 Princeton Circle, W. Denver, CO 80236 303/761-0220 x278	Colorado Migrant Council 7905 W. 44th Avenue Wheatridge, CO 80033 303/425-1532 Legal Center for Handicapped Citizens 1060 Bannock Street Suite 316 Denver, CO 80202 303/575-0542	Special Educational Services Unit State Department of Education 201 East Colfax Denver, CO 80203
Connecticut	Connecticut Special Box 1220 Danbury, CT 06810 203/744-5410	Office of Protection and Advocacy for Handicapped and Developmentally Disabled Persons 1380 Asylum Avenue (rear) Hartford, CT 06105 203/566-7303 United Cerebral Palsy 1 State Street New Haven, CT 06511 203/772-2080	Bureau of Pupil Personnel and Special Educational Services State Department of Education Hartford, CT 06115

RESOURCES

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Delaware	Delaware Special Olympics University of Delaware Athletic Department Newark, DE 19711 302/738-2255	Community Legal Aid Society, Inc. 913 Washington Street Wilmington, DE 19801 302/575-0690	Director of Instruction State Department of Public Instruction John G. Townsend Building P.O. Box 1402 Dover, DE 19901
District of Columbia	D.C. Special Olympics 4200 Wisconsin Avenue, N.W., #205 Washington, D.C. 20016 202/244-1910	Information Center for Handicapped Children 1619 M Street, N.W. Washington, D.C. 20036 202/347-4986 Neighborhood Legal Services Program 635 F Street, N.W. Washington, D.C. 20001 202/628-9161 One America Educational Service, Inc. 1750 Pennsylvania Avenue, N.W., Suite 418 Washington, D.C. 20006 202/628-2216	Assistant Superintendent Special Education Division of Special Educational Programs Presidential Building Suite 602 415 12th Street, N.W. Washington, D.C. 20004
Florida	Florida Special Olympics 2839 N. Monroe Street, #151A Tallahassee, FL 32303 904/385-8178	Governor's Commission on Advocacy for Persons With Developmental Disabilities Division of State Planning Carlton Building Tallahassee, FL 32304 904/488-9070	Bureau of Education for Exceptional Students Florida Department of Education Tallahassee, FL 32304
Georgia	Georgia Special Olympics 1455 Tullie Circle, NE #122 Atlanta, GA 30329 404/636-0388	American Friends Service Committee Southeastern Public Education Program P.O. Box 56JJ Macon, GA 31208 912/742-3335 Georgia Advocacy Office, Inc. 1447 Peachtree Street Suite 811 Atlanta, GA 30309 404/885-1447	Special Education Program, Division of Early Childhood & Special Education State Department of Education Atlanta, GA 30334
Hawaii	Hawaii Special Olympics P.O. Box 3295 Honolulu, HI 96801 808/548-4358	Kahua Ho'omalu Kina, Inc. P.O. Box 939 Honolulu, HI 96808 808/538-6631	Special Education Branch State Department of Education 1270 Queen Emma Street Room 120 Honolulu, HI 11206

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Idaho	Idaho Special Olympics Box 2541 Boise, ID 83702 208/344-6211	CO-AD, Inc. 100 Scout Lane Boise, ID 83702 208/336-5353	Director of Special Education Len Jordan Building State Office Building Boise, ID 83720
Illinois	Illinois Special Olympics University High School Illinois State University Normal, IL 61761 309/438-2551	American Friends Service Committee Midwest Regional Office 407 S. Dearborn Street Chicago, IL 60605 312/427-2533 Illinois Developmental Disabilities Advocacy Authority 222 South College Street Springfield, IL 62706 217/782-9696 Legal Assistance Foundation of Chicago 343 S. Dearborn Street Chicago, IL 60604 312/341-1070	Department of Specialized Educational Services 100 North First Street Springfield, IL 62777
Indiana	Indiana Special Olympics Indiana State University Terre Haute, IN 47809 812/232-6311 x5774	National Center for Law and the Handicapped 1235 N. Eddy Street South Bend, IN 46617 219/288-4751 Protection and Advocacy Project Community Service Council 445 N. Pennsylvania Indianapolis, IN 46204 317/634-4311	Division of Special Education Department of Public Instruction 229 State House Indianapolis, IN 46204
Iowa	Iowa Special Olympics 1133 16th Street W. Des Moines, IA 50265 515/223-0807	Iowa Protection and Advocacy System Iowa Civil Rights Commission 418 Sixth Avenue Liberty Building Room 340 Des Moines, IA 50319 515/281-4121	State Director, Division of Special Education State Department of Public Instruction Grimes State Office Bldg. Des Moines, IA 50319
Kansas	Kansas Special Olympics 5000 Johnson Drive, #40 Roeland Park, KS 66205 913/236-9290	Kansas Advocacy and Protective Services for the Developmentally Disabled, Inc. 513 Leavenworth, Suite 2 Manhattan, KS 66502 913/776-1541	Division of Special Education State Department of Education 120 East Tenth Street Topeka, KS 66612

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Kentucky	Kentucky Special Olympics 128 Walnut Street Frankfort, KY 40601 502/695-5005	Kentucky Protection and Advocacy Program Department of Justice Office of Public Defender 625 Leawood Drive Frankfort, KY 40601 502/564-3754	Bureau for Education of Exceptional Children Capital Plaza Tower 8th Floor Frankfort, KY 40601
Louisiana	Louisiana Special Olympics Hammond State School Rt. 3, Box 165P Hammond, LA 70401 504/546-3111 x211	Louisiana Advocacy System New Orleans Legal Assistance Corporation 226 Carondelet Street Suite 716 New Orleans, LA 70130 504/522-2357 Advocates for Juvenile Justice 344 Camp Street Suite 1101 New Orleans, LA 70130 504/586-8835	Assistant Superintendent Special Educational Services State Department of Education Capital Station P.O. Box 44064 Baton Rouge, LA 70804
Maine	Maine Special Olympics 34 Church Street Gorham, ME 04038 207/839-6030	Maine Coalition for Children With Special Needs 163 Lisbon Street Lewiston, ME 04240 Advocates for the Developmentally Disabled, Inc. Cleveland Hall Winthrop Street Hollowell, ME 04347	Division of Special Education State Department of Educational & Cultural Services Augusta, ME 04333
Maryland	Maryland Special Olympics 2343 Foster Avenue Baltimore, MD 21234 301/661-4200	Disabilities Law Project University of Maryland Law School 500 W. Baltimore Street Baltimore, MD 21201 301/528-6307 Maryland Advocacy Unit for the Developmentally Disabled, Inc. 201 W. Preston Street 13th Floor Baltimore, MD 21201 301/383-3358 Employment Security Administration/DHR 1100 N. Eutaw Baltimore, MD 21201 301/383-5070 Anne Arundel County Association for Retarded Citizens 937 Spa Road Annapolis, MD 21401 301/268-8085	Assistant State Superintendent Division of Special Education P.O. Box 8717, Balt-Wash International Airport Baltimore, MD 21240

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Massachusetts	Massachusetts Special Olympics 25 N. Pleasant Street Taunton, MA 02780 617/822-7963	Massachusetts Advocacy Center Two Park Square Boston, MA 02111 617/357-8431 Center for Law and Education Guttman Library, Third Floor 6 Appian Way Cambridge, MA 02138 North Shore Parents and Friends of the Handicapped 3 Elnew Avenue N. Beverly, MA 01915 Center for Law and the Developmentally Disabled c/o Massachusetts Association for Retarded Citizens, Inc. 381 Elliot Street Newson Upper Falls, MA 02164 617/623-2876 Office for Children 120 Boylston Street Boston, MA 02116 617/727-8900	Division of Special Education State Department of Education Park Square Building 31 St. James Avenue Boston, MA 02116
Michigan	Michigan Special Olympics 126 Rowe Hall Central Michigan University Mt. Pleasant, MI 48859 517/774-3911	Michigan Protection and Advocacy Service for Developmentally Disabled Citizens Michigan Association for Retarded Citizens 416 Michigan National Tower Lansing, MI 48933 517/487-1755 Student Advocacy Center 202 E. Washington Room 300 Ann Arbor, MI 48104 313/995-0477	Special Education Services State Department of Education P.O. Box 30008 Lansing, MI 48909

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Minnesota	Minnesota Special Olympics 830 Second Street, N.E. Minneapolis, MN 55413 612/623-0100	Developmental Disabilities Advocacy Project 501 Park Avenue Minneapolis, MN 55415 612/338-0968 Minnesota Developmental Disabilities Protection and Advocacy System 200 Capitol Square Building 550 Cedar Street St. Paul, MN 55101 612/296-4018 Legal Aid Society of Minneapolis Legal Advocacy for the Developmentally Disabled 501 Park Avenue Minneapolis, MN 55415 612/332-1441	Special Education Section State Department of Education Capitol Square 550 Cedar Avenue St. Paul, MN 55101
Mississippi	Mississippi Special Olympics Box 5174, Southern Station Hattiesburg, MS 39401 601/266-7354	Children's Defense Fund Mississippi Project Box 1684 Jackson, MS 39205 601/355-7495 Mississippi Mental Health Project Box 951 Jackson, MS 39205 601/948-6752 Mississippi System of Protection and Advocacy for Developmentally Disabled Individuals, Inc. 235 Watkins Building 510 George Street Jackson, MS 39201 601/354-6520	Special Education Section State Department of Education Jackson, MS 39205

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Missouri	Missouri Special Olympics 116-½ West Fourth Street Suite 17 Joplin, MO 64801 417/782-0939	Missouri Developmental Disabilities Protection and Advocacy Services, Inc. 420 A Brooks Street Jefferson City, MO 65101 314/636-8113 National Juvenile Law Center St. Louis University School of Law 3701 Lidell Boulevard St. Louis, MO 63108 314/533-8868 Bootheel Legal Aid Society 300 Ward Avenue Caruthersville, MO 63830 314/333-4076	Director of Special Education Dept. of Elementary and Secondary Education P.O. Box 480 Jefferson City, MO 65101
Montana	Montana Special Olympics 3300 Third Street, N.E. Great Falls, MT 59404 406/791-2272 x272	Montana Developmental Disabilities Advocacy Program, Inc. 8000 Dark Horse Road Missoula, MT 59801 406/549-4848	Special Education Unit Office of Public Instruction State Capitol Helena, MT 59601
Nebraska	Nebraska Special Olympics 2858 Iowa Street Omaha, NE 68112 402/455-1462	Nebraksa Developmental Disabilities Protection and Advocacy System 301 Centennial Mall South Box 95007 Lincoln, NE 68507 402/471-2981	Administrator of Special Education Special Education Section 233 S. 10th Street Lincoln, NE 68509
Nevada	Nevada Special Olympics 900 E. Karen Avenue Suite H-214 Las Vegas, NV 89109 702/733-0026	Developmental Disabilities Advocacy Office Governor's Office of Planning Coordination Capitol Building-Room 45 Carson City, NV 89701	Exceptional Public Education Nevada State Department of Education Capital Complex 400 West King Street Carson City, NV 89710
New Hampshire	New Hampshire Special Olympics 74 Academy Street Laconia, NH 03246 603/524-4218	New Hampshire Association for Retarded Citizens, Inc. 110 North Main Street Concord, NH 03301 603/224-7322	Director, Special Education Section State Department of Education 105 Loudon Road Concord, NH 03301

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
New Jersey	New Jersey Special Olympics Montclair State College Bond House Upper Montclair, NJ 07043 201/893-4456	Education Law Center 605 Broad Street Newark, NJ 07102 201/624-1815 New Jersey Department of the Public Advocate Advocacy for the Developmentally Disabled 234 East Hanover Street Trenton, NJ 08625	Acting Deputy Assistant Commissioner Branch of Special Operations and Pupil Personnel Services State Department of Education 225 West State Street Trenton, NJ 08625
New Mexico	New Mexico Special Olympics 3205 Central, N.E. Suite 208 Albuquerque, NM 87110 505/266-8893	New Mexico Developmental Disabilities Protection and Advocacy System State Human Rights Commission 303 Bataan Building Santa Fe, NM 87503 505/827-5681 Legal Advocacy Project Community Services for the Handicapped 122 La Veta, N.E. Albuquerque, NM 87108	Division of Special Education State Department of Education State Educational Building 300 Don Gaspar Avenue Santa Fe, NM 87503
New York	New York Special Olympics Oswald D. Heck Developmental Center Balltown & Consual, Bldg. 10, Room 116 Schenectady, NY 12304 518/370-4816	Public Education Association 20 W. 40th Street New York, NY 10018 212/354-6100 Advocates for Children 29-28 41st Avenue Room 508 Long Island City, NY 11101 212/786-9100 New York Civil Liberties Union 84 Fifth Avenue New York, NY 10011 212/924-7800 Protection and Advocacy System for Developmental Disabilities, Inc. 175 Fifth Avenue Room 1308 New York, NY 10010 212/982-1140 Mayor's Office for the Handicapped 250 Broadway New York, NY 10007 212/566-0972 Center on Human Policy 216 Ostrom Avenue Syracuse, NY 13210 315/423-3851	Office for the Education of Children with Handicapping Conditions State Education Department 55 Elk Street Albany, NY 12234

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
North Carolina	North Carolina Special Olympics P.O. Box 30191 Raleigh, NC 27622 919/787-6714	North Carolina Protection and Advocacy System Department of Administration Howard Building Room 107 112 W. Lane Street Raleigh, NC 27611 919/733-3111	Division for Exceptional Children State Department of Public Instruction Raleigh, NC 27611
North Dakota	North Dakota Special Olympics 905 32nd Ave., S., #105 Grand Forks, ND 58201 701/746-4491	North Dakota Protection and Advocacy System Governor's Council on Human Resources State Capitol-13th Floor Bismarck, ND 58505 701/224-2972	Special Education State Department of Public Instruction Bismarck, ND 58501
Ohio	Ohio Special Olympics 30 E. Broad Street 12th Floor, Room 1236 Columbus, OH 43215 614/466-6012	Ohio Protection and Advocacy System 4554 Coe Avenue North Olmstead, OH 44070 216/777-4683 State Parent Involvement Network 3505 LaRue Prospect Road South Prospect, OH 43342	Division of Special Education 933 High Street Worthington, OH 43085
Oklahoma	Oklahoma Special Olympics 6320 South Peoria Tulsa, OK 74136 918/747-9535	Protection and Advocacy Developmental Disabilities Agency P.O. Box 14452 Oklahoma City, OK 73114 918/743-6453	Director of Special Education State Department of Education 2500 N. Lincoln Room 263 Oklahoma City, OK 73105
Oregon	Oregon Special Olympics P.O. Box 10283 Eugene, OR 97440 503/485-6287	Oregon Developmental Disabilities Advocacy Center 718 West Burnside Street Room 301 Portland, OR 97209 503/228-6571	Director of Special Education Oregon Department of Education 942 Lancaster Drive, N.E. Salem, OR 97310

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Pennsylvania	Pennsylvania Special Olympics Upper Merion Area School District King of Prussia, PA 19406 215/277-7688	Public Interest Law Center of Philadelphia 1315 Walnut Street Philadelphia, PA 19107 215/735-7200 Developmental Disabilities Advocacy Network, Inc. 1607 City Towers 301 Chestnut Street Harrisburg, PA 17101 717/278-0474 Education Law Center 2100 Lewis Tower Building 225 South 15th Street Philadelphia, PA 19102 215/732-6655	Bureau of Special and Compensatory Education P.O. Box 911 Harrisburg, PA 17126
Rhode Island	Rhode Island Special Olympics 1414 Atwood Avenue, Suite #345 Johnston, RI 02919 401/421-6037	The Rhode Island Protection and Advocacy System for Developmentally Disabled Persons, Inc. 65 Wild Street Providence, RI 02904	Dir., Special Education State Department of Education Roger Williams Building Providence, RI 02908
South Carolina	South Carolina Special Olympics P.O. Box 97 Lexington, SC 29072 803/359-9428	South Carolina Protection and Advocacy System P.O. Box 1254 Charleston, SC 29402 803/723-2518	Office of Programs for the Handicapped State Department of Education Room 309, Rutledge Building Columbia, SC 29201
South Dakota	South Dakota Special Olympics Department of HPER/A South Dakota University New Armory #103 Vermillion, SD 57069 605/677-5336	South Dakota Advocacy Project, Inc. 111 West Capitol Avenue Pierre, SD 57501 605/224-8294	Section for Exceptional Children Office Building #3 Pierre, SD 57501
Tennessee	Tennessee Special Olympics Box 39, George Peabody College Nashville, TN 37203 615/327-8155	Tennessee State Planning Office Division of Advocacy 660 Capitol Hill Building 301 Seventh Avenue North Nashville, TN 37219	Division for the Education of the Handicapped State Department of Education 102 Cordell Hull Building Nashville, TN 37219
Texas	Texas Special Olympics P.O. Box 5572 Austin, TX 78763 512/454-4731 x6857	Advocacy, Incorporated 5555 N. Lamar Street Suite K-109 Austin, TX 78711 512/475-5543	Division of Special Education Texas Education Agency 201 East 11th Street Austin, TX 78701

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Utah	Utah Special Olympics 2500 Emigration Canyon Salt Lake City, UT 84108 801/582-4218	Legal Services for the Developmentally Disabled, Inc. 141 East First South Salt Lake City, UT 84111 801/532-3333	Pupil Services Utah State Board of Education 250 East, 500 South Salt Lake City, UT 84111
Vermont	Vermont Special Olympics Room 6, Ira Allen School Building Fletcher Place Burlington, VT 05401 802/863-4793	Vermont Developmental Disabilities Advocacy Project Vermont Legal Aid, Inc. 180 Church Street P.O. Box 562 Burlington, VT 05641 802/863-2881	Special Educational and Pupil Personnel Services State Department of Education Montpelier, VT 05602
Virginia	Virginia Special Olympics Box 780 Madison Heights, VA 24572 804/528-6095	Virginia Developmental Disabilities Protection and Advocacy Office Ninth Street Office Building-Suite 100 Richmond, VA 23219 804/786-4185 800/552-3962 (toll free from outside Richmond) American Civil Liberties Union of Virginia Student Rights Project 1000 One East Main Street Suite 515 Richmond, VA 23219 804/644-8022	Division of Special Education State Department of Education Richmond, VA 23216
Washington	Washington Special Olympics 10040 Aurora Avenue, N. Seattle, WA 98133 206/523-3179	Troubleshooters 1600 W. Armory Way Seattle, WA 98119	Special Services Section Old Capitol Building Olympia, WA 98504
West Virginia	West Virginia Special Olympics P.O. Box 3115 Parkersburg, WV 26101 304/422-1868	West Virginia Advocates for the Developmentally Disabled, Inc. 922 Quarrier Street Embleton Building Room 309 Charleston, WV 25301	Division of Special Education West Virginia Department of Education Building 6, Room B-315 State Capitol Charleston, WV 25305

States	Special Olympics Chapters	State and Local Advocacy Groups	State Special Education Departments
Wisconsin	Wisconsin Special Olympics 2059 Atwood Avenue Madison, WI 53704 608/241-1324	Wisconsin Association for Retarded Citizens 2 West Mifflin, Suite 200 Madison, WI 53703 608/831-3444	Division for Handicapped Children & Assistant State Superintendent State Department of Public Instruction 126 Langdon Street Madison, WI 53702
Wyoming	Wyoming Special Olympics Pioneer Park Center 1331 Talbot Court Cheyenne, WY 82001 307/637-6491	Developmental Disabilities Protection and Advocacy Systems, Inc. 508 Hynds Building Cheyenne, WY 82001 307/632-3496	Office of Exceptional Children State Department of Education Cheyenne, WY 82002
Puerto Rico	Puerto Rico Special Olympics Dept. of Physical Education Bayamon Regional College University of Puerto Rico Bayamon, PR 00619 809/780-7870	Protection and Advocacy System of Puerto Rico Consumer Affairs Dept. Box 13934 Minillas Gubernamental Center North Building Santurce, PR 00908	
Guam	Guam Special Olympics Box 8319 Tamuning, GU 96911 646-8052	Advocacy and Protective Services for the Services for the Developmentally Disabled P.O. Box 10C Agana, GU 96910	

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The following is a select list of terms that are intended as a basic reference for various professionals and parents interested in physical education and recreation for the handicapped. Interdisciplinary in nature, the glossary includes terminology common to the fields of special education, therapeutic recreation and adaptive physical education. Also included in this section is a select listing of terms and related information specific to P.L. 94-142, The Education for All Handicapped Children Act of 1975. This glossary of terms is not expected to be extensive or complete. Rather, the terms and accompanying definitions have been developed from a wide variety of professional resources for the purpose of promoting a minimum, but desired level of understanding among various disciplines and persons interested in the handicapped, with particular attention to physical education and recreation.

P.L. 94-142 Terms

Disability

A child with a *disability* means a child with one of the impairments listed in the definition of "handicapped" children . . . when an impairment is of such a nature that the child needs special education, it is referred to as a disability.

Free appropriate public education

As used in this part, the term *free appropriate public education* means special education and related services which:

a) Are provided at public expense, under public supervision and direction, and without charge.

b) Meet the standards of the State educational agency, including the requirements of this part.

c) Include preschool, elementary school, or secondary school education in the State involved, and

d) Are provided in conformity with an individualized education program which meets the requirements of 121a.340-121a.349 of Subpart C.

Handicapped children

a) As used in this part, the term *handicapped children* means those children evaluated in accordance with 121a. 530-121a.534 as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf-blind, multihandicapped, or as having specific learning disabilities, who because of those impairments need special education and related services.

1. *Deaf* means a hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance.

2. *Deaf-blind* means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for deaf or blind children.

3. *Hard of hearing* means a hearing impairment, whether permanent or fluctuating, which adversely affects a child's educational performance but which is not included under the definition of *deaf* in this section.

4. *Mentally retarded* means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affects a child's educational performance.

5. *Multihandicapped* means concomitant impairments (such as mentally retarded-blind, mentally retarded-orthopedically impaired, etc.), the combination of which causes such severe educational problems that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blind children.

6. *Orthopedically impaired* means a severe orthopedic impairment which adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (i.e., clubfoot, absence of some member, etc.), impairments caused by disease (i.e., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (i.e., cerebral palsy, amputations, and fractures or burns which cause contractures).

7. *Other health impaired* means limited strength, vitality or alertness, due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophelia, epilepsy, lead poisoning, leukemia, or diabetes, which adversely affects a child's educational performance.

8. *Seriously emotionally disturbed* is defined as follows:

i) The terms mean a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance:

A) An inability to learn which cannot be explained by intellectual, sensory, or health factors;

B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;

C) Inappropriate types of behavior or feelings under normal circumstances;

D) A general pervasive mood of unhappiness or depression; or

E) A tendency to develop physical symptoms or fears associated with personal or school problems.

ii) The term includes children who are schizophrenic or autistic. The term does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed.

9. *Specific learning disability* means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, or of environmental, cultural, or economic disadvantage.

10. *Speech impaired* means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child's educational performance.

11. *Visually handicapped* means a visual impairment which even with correction, adversely affects the child's educational performance. The term includes both partially seeing and blind children.

Individualized education program (I.E.P.)

a) Statement of the present levels of educational performance of such child.

b) A statement of annual goals including short term instructional objectives.

c) A statement of the specific educational services to be provided to such child, and the extent to which the child will be able to participate in regular educational programs.

d) The projected date for initiation and anticipated duration of such services and appropriate objective evaluation procedures and schedules for determining on, at least an annual basis, whether instruction and objectives are being achieved.

Least restrictive environment

Each public agency shall insure:

1) That to the maximum extent appropriate, handicapped children, including children in public or private institutions or other care facilties, are educated with children who are not handicapped, and

2) That special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Nonacademic services

a) Each public agency shall take steps to provide nonacademic and extracurricular services and activities in such a manner as is necessary to afford handicapped children an equal opportunity for participation in those services and activities.

b) Nonacademic and extracurricular services and activities may include counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the public agency, referrals to agencies which provide assistance to handicapped persons, and employment of students, including both employment by the public agency and assistance in making outside employment available.

c) The term also includes vocational education if it consists of specially designed instruction, at no cost to the parents, to meet the unique needs of a handicapped child.

Special Education Terms

Adaptive behavior—Personal adjustment to the environment that promotes one's social or biological welfare.

Advocacy—A process directed towards improving the quality of goods and services rendered to consumers. An advocate is a person who generates and sustains the advocacy process through personal actions in support of a philosophy or principle (i.e., rights of the handicapped).

Evaluation—To determine the progress an individual has made in various areas of learning.

Exceptional children—Refers to children who require special education programs, services, facilities, etc. in order to meet their educational needs. A traditional and generic term referring to both educationally gifted and educationally handicapped students.

Habilitation—Refers to training efforts to help the handicapped develop their capacities, reduce dependency, and make them as capable and independent as possible through programs appropriate to their needs and ability levels. Usually associated with vocational habilitation.

Handicapped children—A traditional and generic term referring to students who demonstrate a significant learning problem and require special education services. All handicapping conditions are included under this term. It is synonymous with the term exceptional children, with the exception of giftedness.

Mainstreaming—The administrative organizational plan which allows the handicapped child to learn with his/her chronological peers in every possible situation, while providing a trained specialist or specialists for supportive instruction in the specific skills and behaviors that cannot be accommodated through the regular education program. Mainstreaming is a popular term that has been frequently interpreted to refer to the mildly handicapped, even though it has generally been defined to include all levels of disability. Because of the lack of agreement regarding such problems of interpretation, the term is not mentioned in P.L. 94-142 and, instead, is replaced by the term *"least restrictive environment"*.

Physical education—The development of physical and motor fitness; fundamental motor skills and patterns; and

the skills in aquatics, dance and individual and group games and sports (including intramural and lifetime sports). The term includes special physical education, adapted physical education, movement education and motor development.

Program options—Each public agency shall take steps to insure that its handicapped children have available to them the variety of educational programs and services available to non-handicapped children in the area, served by the agency, including art, music, industrial arts, consumer and homemaking education, and vocational education.

Recreation—Includes assessment of leisure function-therapeutic recreation services, recreation programs in schools and community agencies and leisure education.

Related services—As used in this part, the term *related services* means transportation and such developmental, corrective services as are required to assist a handicapped child to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training.

Special education

a) As used in this part, the term *special education* means specially designed instruction, at no cost to the parent, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions.

b) The term includes speech pathology, or any other related service, if the service consists of specially designed instruction, at no cost to the parents, to meet the unique needs of a handicapped child, and is considered *special education* rather than a *related service* under State standards.

Normalization—It is a philosophy that affirms the right of all human beings to experience the patterns and conditions of every day life which are as close as possible to the norms and patterns of the mainstream of society.

Rehabilitation—To restore to a state of physical, mental and emotional health through treatment and training.

Survival skills—Refers to minimum skills needed for successful adjustment in the home and community. In contrast to academic or basic skills, survival skills refer to personal, social, vocational and leisure-time skills. The term is synonymous with activities of daily living (ADL).

Recreation Terms

Leisure—That portion of an individual's time which is not devoted to work or work-connected responsibilities or to other forms of maintenance activity and which, therefore, may be regarded as discretionary or unobligated time.

Leisure counseling—A process which utilizes counseling techniques and recreation experiences in order to help individuals gain an understanding of the role of leisure in their lives and derive meaning and self-satisfaction from their leisure time. Leisure counseling engages the individual in the process of value clarification for purposes of seeking leisure experiences which allow him/her movement towards self-realization and fulfillment.

Leisure education—Refers to educating for the wholesome use of discretionary time in order to enhance the quality of one's life. The term implies a conscious and systematic effort to bring about an attitude favorable toward leisure. Education for leisure includes, but is not limited to, the development of knowledge, skills and appreciations which prepare individuals to make more independent and constructive use of their leisure time.

Play therapy—A technique for helping a person become more sociable by structuring his/her leisure environment to evoke certain responses.

Recreation—Activities or experiences carried on within leisure that are chosen voluntarily by the participant and selected because of the satisfaction or pleasure gained from them and/or their perceived personal and social values.

Therapeutic recreation services—Can be viewed as a process which utilizes recreation for purposive intervention in some physical, emotional and/or social behavior in order to bring about a desired change in that behavior and to promote the growth and development of the handicapped or disabled individual. Such services contribute directly to improving the disabled individual's physical strength, emotional growth and self-confidence. They are practiced by specialists with specialized training, whose services include, among others, the areas of activity analysis, leisure counseling and prescriptive programming performed in institutions, schools and community settings.

Physical Education Terms

Adapted physical education—A diversified program of developmental activities, games, sports and rhythms suited to the interest, capabilities, and limitations of students with disabilities who may not safely or successfully engage in unrestricted participation in the vigorous activities of the general physical education program.

Perceptual motor activities—Activities designed to develop neuromuscular patterns and reactions which are inherent in and transferable to higher motor skills. They generally include the following types of activities: movement exploration, balance, eye-hand-foot coordination, basic movement and locomotor patterns.

REFERENCES

The following legal citations to federal statutes and regulations should be useful as reference and supportive material concerning Public Law 94-142 and Section 504 of the Rehabilitation Act of 1973. As additional information, cases have been cited corresponding with various regulations and statutes of the laws. These lists of cases are by no means complete. For a more recent and comprehensive list, refer to the publication "Education Law Bulletin" found at any law library.

Special Education and the Handicapped
Legal Citations to Federal Statutes and Regulations, and Cases

Special Education Placement and Programming

	P.L. 94-142 20 U.S.C. §§1401 et seq.	P.L. 94-142 Regulations 45 Part 121a	§504 Rehabilitation Act of 1973 29 U.S.C. §794	§504 Regulations 45 C.F.R. Part 84	Case Law	Cases Pending
Decision-Making for Placement	by local or intermediate educational agency, teacher, parents, and, where appropriate, the child-§1401(19)	parental, child rights-§§121a.344-45 participants-§121a.344 decision by group knowledgeable about child-§121a.533(1)(3) based upon many factors-§121a.533(a)(1)	"No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."	draw on information from variety of sources-§84.35(c) group decision-§84.35 (c)		
Free Appropriate Public Education (FAPE)	special educ. and related services at public exp., under public supervision and direction, mtg. state standards at preschool, elem., and secondary levels; provided under individualized education programs-§1401(18) right to-§1415(b)(1)(A)	defined as per statute-§121a.4 timelines, methods, types, services, options, etc.-§§121a.300 to §307		at no cost to parents except for fees imposed on nonhandicapped-§84.33(c) designed to meet individual needs-§84.33(b) provided with procedural protections-§84.33(b)	§504 no cost, exclusion **Kruse v. Campbell**, C.A. No. 75-0622 R. (E.D. Va. 3/23/77) **Mattie T.** **Hairston** **Dennis R.**	**Crawford v. Univ. No. Carolina**, 440 F Supp. 1047 (M.D. N.C., 1977) **PASE** **Crowder v. Rites**, C.A. No. 000384 (Supr. Ct., L.A.-Cty. Cal., 12/20/76) **Lopez v. Salida Sch. Dist.**, C.A. No. C-73078 (Dist. Ct., Denver Cty. Colo., 7/21/77) **MARC v. N.J.**, Dept. Human Services, C.A. No. C-2473-76 (Super. Ct., Chancery Div., Hunterdon Cty. N.J., 3/16/76) **Tyrone P.** **Armstrong v. Kline**, (C.A. No. 78-172 E.D. Pa., 1/17/78)
Least Restrictive Environment (LRE)	to maximum extent appropriate, handicapped must be educated with nonhandicapped and segregation of handicapped occurs only when education in regular class with supplementary aids and services is unsatisfactory-§1412(5)	defined-§121a.550 continuum of services, placements, nonacademic services, etc.-§§121a.551-556 describe extent of LRE in IEP-§121a.346(c)		§84.33(a) maximum integration in academic settings §84.34(b) maximum integration in nonacademic settings §84.34(c) if not integrated, comparable facilities	**Mattie T.** **Hairston v. Drosick**, 423 F Supp., 180 S.D. W. Va., 1/14/76	**Kenneth J. v. Kline**, C.A. No. 77 (F.D. Pa. 1977)
Private School Placement	services required at no cost if properly placed or referred by educational agency-§1413(a)(4)	same rights-§121a.2 if appropriate, no cost to parents-§121a.302 implementation when placed by state-§§121a.400-403 implementation when placed by parents-§§121a.450-460		at not cost to parents only if FAPE not available publicly-§84.33(c)(4)	**Armstrong**	
Individualized Education Program	joint written statement of child's present levels of educational performance, annual goals, short-term instructional objectives, educational services, extent of regular program participation, date of initiation of services, anticipated duration of services, objective evaluation criteria, evaluation procedures and at least annual evaluation schedules-§1401(19)	defined-§121a.340 required by 10/1/77-§121a.342(a) required before special ed starts-§121a.342(b) P.E. included in all programs-§121a.307 meetings to develop IEP-§§121a.343-345, 347-348 parent participation-§§121a.344(a)(3) and 345 IEP accountability-§121a.349		designed to meet individual educational needs of handicapped persons as adequately as needs of nonhandicapped are met—IEP one way to do this-§84.33(b)		**P-1 v. Shedd** (C.A. No. H78-58, D. Conn., 2/2/78)
Transportation	may be required to assist handicapped child to benefit from education-§1401(17)	defined as part of "related services" mandated-§121a.13(b)(13) can be included as part of child's IEP-§121a.346(c)		at no greater cost to parents than for nonhandicapped-§84.33(c)(2)		
Review	annual review required at minimum-§1414(a)(5)	annual review required-§§121a.522(a)(1) and 343(d)		periodic reevaluations required-§84.35(d)		

Special Education Identification and Phase-In

	P.L. 94-142 20 U.S.C. §§1401 et seq.	P.L. 94-142 Regulations 45 Part 121a	§504 Rehabilitation Act of 1973 29 U.S.C. §794	§504 Regulations 45 C.F.R. Part 84	Case Law	Cases Pending
Handicapping Conditions Covered	child needing special ed who is mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically or other health-impaired-§1401(1) specific learning disabilities-§1401(15)	definitions-§121a.5 (see also proposed regs re learning disabilities, 41 Fed Reg. 52404, 11/29/76	"No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."	anyone with physical or mental impairment substantially limiting one or more major life activities (including learning) or with a record of such impairment or who is regarded as having such-§84.3(j)	§504 definition re admissions "otherwise qualified", Davis (424 F Supp. 1341 E.D. N.C. 1976)	
Child Search	required to identify, locate and evaluate all children who are handicapped and in need of special ed and to determine which are not receiving needed services-§1414(a)(1)	required to identify, locate and evaluate all children who are handicapped and in need of special ed-§121a.220		required to identify and locate every qualified handicapped person not receiving public education and notify each of rights-§84.32	**Mattie T.**, C.A. No. 75-31-S, N.D. Miss. 7/26/77	
Priorities for Providing Free Appropriate Public Education (FAPE) Prior to September 1, 1978	state must establish priorities for serving, first, children not receiving any education and then, children receiving an inadequate education-§1412(3)	use federal funds to provide FAPE first to children who are not receiving any education and then to provide services to those receiving an inadequate education-§121a.320-§324. NOTE: all children must be fully served by 9/1/78				
Timetables for Service	FAPE available for all handicapped children from 3 to 18 years old by 9/1/78 and for all between 3 and 21 years old by 9/1/80 unless state law or practice to contrary-§1412(a)(B)	§121a.122 §121a.300		effective 6/3/77 no handicapped person may be excluded, all other requirements must be met at earliest practicable time and in no event later than 9/1/78-§84.33		

Special Education Evaluations

Evaluations Required	§1412(2)(c)	required prior to placement-§121a.531 defined-§121a.500	"No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."	required prior to placement or any change in placement-§84.35(a)	**Mattie T.** **Dennie R. v Wood**, CA No. 77-1360 (D So Car., 8/22/77) (consent decree)	**Tyrone P. v. Maschmeyer**, C.A. No. S77-0098-C (E.D. Mo. 12/9/77)
Cost of Evaluation		independent evaluation at public expense when-§121a.503(a)(3)(a) and (b)		see "free education" §84.33(c)	**Stuart v. Nappi**, 443 F Supp. 1235 (D Conn. 1977)	
Independent Evaluation	right to-§1415(b)(1)(A)	defined-§121a.503(a)(3) use of results-§121a.503(c) requested by hearing officer-§121a.503(d)				
Evaluation Instruments, Procedures	nondiscriminatory test materials in usual mode of communication required, multifaceted evaluations required-§1412(5)(C)	in native language-§121a.532(a)(1)s trained evaluators-§121a.532(a)(3) validated instruments-§121a.532(a)(2) nondiscriminatory as to race, culture, handicap-§121a.532(c), §530(b) multifaceted-§121a.532(b)-(f)		validated instruments-§84.35(b)(1) nondiscriminatory as to handicap-§84.35(b)(3) multifaceted-§84.35(b)(2)	**Mattie T.**	**PASE v. Redmond**, C.A. (No. 74C 3586, N.D. Ill. Comp. 12/12/74)
Reevaluations		at least every 3 years-§121a.534(b) anytime at parental or teacher request or if warranted-§121a.534(b)		periodic reevaluation of students provided special ed required-§84.35(d)		

Special Education Procedural Due Process Protections

	P.L. 94-142 20 U.S.C. §§1401 et seq.	P.L. 94-142 Regulations 45 C.F.R. Part 121a	§504 Rehabilitation Act of 1973 29 U.S.C. §794	§504 Regulations 45 C.F.R. Part 84	Case Law	Cases Pending
Notice	written prior notice in notice in written language when initiating, changing or refusing to identify, evaluate, place, or provide free appropriate public education-§1415(b)(1)(C)	when-§121a.504(a) content and form-§121a.505	"No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."	whatever action taken regarding identification, evaluation or educational placement-§84.36 notice of nondiscrimination-§84.8	**Mattie T.** **Hairston**	**PASE** **Armstrong**
Consent		defined-§121a.500 prior to placement evaluation and initial placement in special ed-§121a.504(b) procedures when parent refuses-§121a.504(c)				
Surrogates	assignment of surrogate when parent/guardian unknown, unavailable or child a state ward-§1415(b)(1)(B)	when-§121a.514(a) criteria for selection-§121a.514(c) and (d) responsibilities-§121a.514(e)				
Access to Records/ Confidentiality	examine records-§1415(b)(1)(A) (See also Buckley Amnd., 20 U.S.C. §1232g)	records re identification, evaluation, placement, FAPE-§121a.502 definitions-§121a.500, 560 consent to release-§121a.571 access rights-§121a.562 notice of rights-§121a.562 amendments-§121a.567 hearings-§§121a.568-570		examine records-§84.36		**PASE**
Grievance Procedures				adoption of grievance procedures required for all recipients employing 15 or more persons for complaints alleging any action prohibited by Part 84 (except re postsecondary admissions)-§84.7		
Hearings	whenever complaint received-§1415(b)(2) hearing rights-§1415(d)	when-§§121.506, 504(a) hearing rights-§121.508 impartial hearing officer-§121a.507 timelines-§121a.512		right to impartial hearing-§84.36	**Hairston** **Mattie T.**	**PASE**
Administrative Appeals	impartial review-§1415(c)	impartial review-§§121a.509, 510 timelines-§121a.512		right to review-§84.36 see procedures for Title VI, Civil Rights Act of 1964, 45 C.F.R. §§80.6-80.10 and Part 81		
Judicial Review	civil action in state or federal court-§1415(e)(3)	when-§121a.511		see procedures for Title VI, Civil Rights Act of 1964, 45 C.F.R. §§80.6-80.10 and Part 81	§504 private cause of action **Lloyd**, 548 F.2d 1277 (7th Cir. 1977) **Dennis H.** **Mattie T.** **Crawford v. Univ. No. Caro.** 440 F.Supp. 1047 (M.D. N.C. 1977)	

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This chart was prepared by Diana Pullin, Center for Law and Education, Inc. An earlier version appeared in "94-142 and 504: Numbers That Add Up to Educational Rights for Handicapped Children," a guidebook for parents and advocates published by the Children's Defense Fund of the Washington Research Project, Inc.

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IMPLEMENTATION FORMS

The following spirit masters have been included in this guide so that you may incorporate them into the planning of your physical education, recreation or Special Olympics program. The spirit masters should be used in conjunction with Guide 9: Developing a Comprehensive Individualized Physical Education Program.

The spirit masters are reproducible worksheets to be used as a means of helping teachers, recreators, Special Olympics volunteers and parents plan an individualized physical education or recreation program. Hopefully, they will also serve as reference sources after the training sessions.

To duplicate spirit masters, run them on a duplicating machine such as the Ditto E41 or the A.B. Dick Models #210 and #215. They may be saved to run a second or third time. One spirit master makes up to 250 clear copies.

The spirit masters included in this guide are as follows:

- Annual Program Plan
- Assessment Evaluation Sheet
- Annual Goals and Objectives
- Program Plan Evaluation
- Monthly Program Plan
- Physical Education Annual Program

HOW YOU CAN HELP SPECIAL OLYMPICS

Direct, Continual Involvement with Mentally Retarded

Volunteer as an assistant coach for various Special Olympics sports; as an assistant in physical education or recreation programs at schools, residential settings, etc.; as a buddy to a mentally retarded individual; or in various Special Olympics training programs.

Project by Project Assistance to Mentally Retarded

Serve as a volunteer scorer, timer, guide, chaperone, etc. for a Special Olympics event or participate in a recreational outing such as a hike, picnic, or campout.

Parent Involvement and Support

Serve as an advocate for Special Olympics through presentations at PTA meetings, parent advocacy groups, etc. or as a member of your local Special Olympics advisory board. Develop a year-round training schedule for your Special Olympian and your family.

Education and Recreation Support of Special Olympics

Support Special Olympics programs in your school or center by encouraging participation, allocating time for Special Olympians to train, approving release time to coaches, providing use of facilities and equipment, or conducting in-service training to teachers about Special Olympics.

FACTS ON SPECIAL OLYMPICS

Program	Special Olympics is an international program of physical fitness, sports training and athletic competition for mentally retarded children and adults.
Sponsor	Special Olympics was created by the Joseph P. Kennedy, Jr. Foundation and is operated by Special Olympics, Inc., a non-profit, charitable organization located in Washington, D.C.
Participation	Mentally retarded individuals 8 years of age or older are eligible to participate.
Sports	Special Olympics official sports offered are Basketball, Bowling, Floor Hockey, Frisbee Disc, Gymnastics, Ice Skating, One Meter Diving, Poly Hockey, Soccer, Softball, Swimming, Track and Field, Volleyball, Wheelchair Events, Alpine and Nordic Skiing.
Games	Olympic-type events are held annually at each organizational level. Local Games are held year-round in communities all over the world. Chapter and National Games are annual events while International Games are held every four years.
Volunteers	Over 200,000 volunteers provide the manpower for Special Olympics.

SPECIAL OLYMPICS MILESTONES

1963	Kennedy Foundation and American Association for Health, Physical Education and Recreation cooperate on a physical fitness program for mentally retarded individuals and offer awards for achievement.
1968	Senator Edward Kennedy announces establishment of Special Olympics, Inc. The National Association for Retarded Citizens pledges its nation support.
1970	All 50 states, the District of Columbia and Canada have Special Olympics organizations and State Directors. 50,000 athletes are involved.
1971	U.S. Olympic Committee gives Special Olympics official approval as one of only two organizations entitled to use the name "Olympics".
1974	400,000 athletes take part in 1974 Special Olympics program showing that participation continues to expand.
1975	Fourth International Special Olympics Games take place with 3,200 young athletes participating from ten countries at Central Michigan University.
1977	Participation in Special Olympics climbs to over 700,000 with increased number of adult participants. 19 countries now have Special Olympics.
1979	Fifth International Summer Special Olympics Games take place with 3,500 athletes participating from every state and more than 20 countries at the State University of New York College at Brockport.
1980	Participation in Special Olympics increases to approximately 1 million. 40 countries are now involved.
1981	Second International Winter Special Olympics Games will be held at Smuggler's Notch/Stowe in Vermont.